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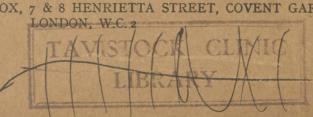
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# THE INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS

VOLUME XX

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PART 2

#### ORIGINAL PAPERS

ON RETAINING THE SENSE OF REALITY IN STATES OF DEPERSONALIZATION <sup>1</sup>

BY
C. P. OBERNDORF
NEW YORK

In previous papers I have advanced the view that a clash in identifications which go to make up the super-ego is an important factor in the phenomenon of depersonalization both in its milder forms, such as occur in normal persons, and in those cases where the symptom becomes the chief complaint of the patient. At the outset I would limit the term depersonalization to such conditions where the patient complains that he does not seem real to himself. The proposal of an addition to terminology made by Mayer-Gross (I) designating those situations where the outside world of environment appears strange or unreal as states of derealization in distinction to depersonalization seems advantageous. Some patients may suffer at different times or even at the same time from both depersonalization and derealization.

In my experience four mechanisms are concerned in this alteration of personality called depersonalization. They are: (I) parental identifications where a certain characteristic of one parent continues to be considered by the patient unconsciously as specific to the sex of that parent; (2) erotization of thinking and its excessive cathexis as characterized in such identifications. During this process there is a withdrawal of libido from the more vital human occurrences in the environment and from the body itself. It is invested in other activity, primarily thinking, either in form of abstractions or in fantasy. (3) Identification of thinking as a characteristic of the parent of the opposite sex—most often this occurs in the female child

137

<sup>&</sup>lt;sup>1</sup> Read before the American Psychoanalytic Association, December 27, 1937, in Washington, D.C.

who regards 'thinking' as a masculine characteristic (of her father); (4) through repression, because of the resulting conflict the patient attempts to rid himself of that portion of the super-ego which, as he grows older, he comes to consider as incongruous with and therefore harmful to his biological rôle in life.

The change which results from this repression produces in the patient a feeling that he is no longer his accustomed self. In effect this is so, for with the change in type of master controlling the ego, the latter experiences sensations unknown to it since early childhood and seems strange and unnatural to itself. It is not clear in which part of the personality this change is perceived or registered.

In no case coming under my observation has there been a complete depersonalization—that is, a complete loss of former self, although certain retrograde amnesias might be possibly so considered. It has not been my experience to observe cases described by Morton Prince (2), Franz (3), and others as an alternation of two or more distinct personalities in the same individual. So far as I know, no cases of dual personality have been recorded in psycho-analytic literature.

In connection with depersonalization tendencies, Searl (4) has observed that an infantile identification with inanimate objects plays an important rôle in the mechanism. In amplification of Searl's work it may be said that such identifications occur because of threats or deprivations by parents in infancy. Such loss of tender affection, operating as a threat, impels the child to become still and lifeless like the familiar inanimate objects which escape wrath, menace or denunciation. Conversely, the child may invest its affection in inanimate objects which at least do not rebuff him, even though they do not supply him with the positive affection which he craves and needs. To compensate for this lack he may endow such lifeless objects with magic and animistic qualities. Frequently we see an analogous identification by children who pretend that they are animals, such as dogs or cats, which are permitted certain activities (defæcation and urination at will, at least outdoors) for which children are punished and animals are not.

Depersonalization results from a need in the person in whom it occurs to rescue himself from the threat of the outside world by presenting only one part of his personality to it. The primary danger originally resided in one parent, representing the patient's outer world, and later became part of the super-ego. A minor manifestation of this tendency to avoid the living as dangerous is the proclivity of

these patients to shift the conversation whenever they sense a threatening theme to the impersonal, the abstract and inconsequential topics. Excessive politeness in manner and speech may serve similarly as a protective mechanism to reinforce impersonality and prevent the oddness of deviations from becoming apparent.

On the other hand, in the case of a physician suffering from a form of psychic dualism approximating true co-conscious mentation, all his rage and hatred was directed toward corporations, such as electric light and telephone companies—so often called soulless—rather than against individuals. He would rail against life in general instead of some one in particular. While he complained that one could not fight a puff of smoke, in reality this is what he usually did, for he had found that the safety in fighting abstractions, or smoke, lay in the fact that he remained immune from counter-attack by them.

In the course of this defensive process the patient may displace upon some inanimate object in the environment a feeling which is necessary to repress because it will not be tolerated by his immediate human environment. In psycho-analytic literature the value of the symbolic identification with animals as substitutes for persons has been minutely discussed, but both the person and the symbolic substitute remain real.

By way of transition to the retention of reality and its symbolic significance in patients suffering from unreality, I wish to report the feeling of the unreality of a part of the body, the phallus, in a patient, aged thirty-six, referred for psychic impotence and hypertension. He remarked that as a boy when an erection appeared spontaneously he tried to suppress it, for the erect penis seemed to him something foreign or unnatural—' as though it were not part of me. I used to think what right the penis had to stand up so boldly when it should not peep a word'. The patient had indulged in sadistic fantasies of violence through binding the hands of a boy or a woman and through which he experienced sexual excitement and erections. These erections he was able to relieve by thinking of someone intellectually dullnotably an aunt who was considered the most stupid person in the family. This patient suffered from erotization of thinking, and thinking about stupidity seemed to counteract the effect of his own intellectual activity.

Comparable to the unreality of the phallus itself in this case, it seems possible that where the arm or foot seems dead, unreal or not a part of the patient, the particular parts are affected because of their symbolic phallic value. It seems possible that analogous symbolic determinants may be involved in the 'deadness' of other organs of the body, internal as well as external.

In contrast to the feeling in the previous case that the phallus seemed unreal and had no right to express or assert itself (peep) I shall proceed to an instance where in the face of a sense of unreality existing for most of the patient's life, certain objects stood out as retaining their reality. In this case, as in all others from which illustrations in this paper are drawn, the patient's dominating symptom had been some form of unreality and each patient had been psychoanalysed for periods of six months to several years.

The patient, married, aged thirty, of German Protestant parentage, came to analysis for the feeling that she might faint when alone and for over-indulgence in alcohol. She had been the leading student in her class in high school, but her college record had not continued at the same high standard because her neurosis began to interfere. Nevertheless she possessed an extremely logical mind, and any breach in logic became a source of annoyance to her. Her idea of pleasure to the exclusion of all other pleasures consisted in reading alone.

She had been aware of homosexual attractions in which she had usually assumed the masculine rôle while a girl at camp, and during her college days the homosexuality progressed to physical contacts. However, no sense of real feeling existed in her emotions although an appreciation of emotion occurred when it could be intellectualized. Rarely indeed did she ever feel joy, sorrow, rage, pity, etc. A similar condition of impersonality existed in her contact with other people.

In contrast to this emotional deadness and impersonality and the many things which seemed alien and unrelated to her private thoughts and feelings, a few things—so rare that they stood out momentously in the review of her life's history—seemed to have a real and personal importance to her. Let me quote the patient's description of those objects which had persistent reality and the conditions under which such persistence occurred.

'Foremost among these are books. The best illustration of my attitude toward them is an incident which happened while I was in college. I was taking a course in conversational French and the instructor had the rather hopeless task of finding topics that would keep us chatting brightly for an hour. One day she announced that we would all discuss what books we had brought with us to college and why we had chosen them. I was horrified at such a subject being

introduced into a group of casual acquaintances and, though I tried to protect myself by being as brief and non-committal as possible, I was acutely embarrassed all during the class period. In fact, I was so disturbed that I did something quite unusual for me. Mademoiselle was standing by the door as I was leaving and I told her that I didn't think she should have chosen such a subject; that it was too intimate and personal; that I wouldn't mind discussing it with a few good friends but that I objected to having to talk about it in a classroom.

'The themes that I wrote in college were also very real to me. I saved them for several years—until just before my marriage, which took place about four years after I graduated—and I used to enjoy rereading them occasionally. I think what I really enjoyed was rereading the comments of my English professor. That was a form of human communication that really meant something to me. But I never shewed them to anyone else. I had mentioned to my mother that, as an assignment, I had written a character sketch of a friend of our family's. She was very interested and asked to see it several times, but I always put her off until it was safely destroyed. To my mind, allowing her to read what I had written would have constituted an embarrassing intimacy that I couldn't stand.'

In this case the early deprivation of love and affection on the part of the mother for the patient was an outstanding and decisive factor. Her fear of and hostility to her mother continued so great that during the early period of the analysis the mention of her mother by the analyst threw the patient into a paroxysm of trembling. To this patient the indulgence in thinking constituted a solace to counteract the absence of affection and represented a distinctly masculine drive.

She states, 'Part of this whole picture is the way that I still feel about thinking. I cannot think about anything that is of personal importance to me while there is anyone in the room whom I would not want to know what my thoughts are. Thinking my thoughts seems just as real to me as speaking them aloud, and so, if I wish to conceal them, I must not even think them while anyone else is near. Writing is real to me in much the same way. While I am writing I feel the unusual satisfaction of personal integration, and if anyone approaches me while I am so engaged, even though I know that person will not look at what I am writing, I feel embarrassed and uneasy.'

In conditions where symptoms of depersonalization have occurred and the person is unreal, certain objects or situations are reported by them as retaining their reality. These dead but symbolically significant objects continue to retain their reality because they are harmless. The symbolic value of the objects remaining real in the face of the patient's unreality has received little attention. I shall attempt to shew that through the interpretation of their symbolic value one may obtain information concerning the motivations which gave rise to the development of the feeling of unreality or depersonalization. The situations in which unreality suddenly occurs also may have a determinant symbolic significance.

Some patients suffering from unreality relate that certain objects have remained real—as books to the patient mentioned above—which we may call persisting reality. In such an instance a pillow, given to a patient at birth, and called 'pilpil' by her, continued to be almost the sole live object during her long continued unreality. It has been reported by men in detail. In analysis 'pilpil' to which the patient had always referred as 'he' proved definitely to be a symbol of the phallus and represented more remotely the patient's identification with her father. In passing it may be remarked that the patient abandoned her previously inseparable friend, 'pilpil', as a result of analysis and her feeling of unreality has not returned for two years since the cessation of treatment.

As an example of persistent and conditioned reality occurring in patients suffering from unreality, I would describe reactions in a patient of Italian parentage whose profound depression and social isolation first led him to seek medical help. During the course of prolonged treatment which lasted for many years a most complex mental picture unfolded. The patient was analysed and, as the long analysis seemed to be approaching an end, he reported that he now realized that most of his impressions and my analytic interpretations had been received by some secondary personality. He then appreciated for the first time that the major portion of his previous life had been in a state of unreality—that he had not been himself during the many years and that the numerous pathological symptoms of which he complained—compulsions, depression, manic-like episodes. somatic complaints, and even delusions—had appeared in the secondary personality. Being unaware of this state he was unable to communicate it to the physician and the latter did not discern that he was dealing with a secondary personality. The analysis seemed to have proceeded satisfactorily, for a very marked improvement in behaviour occurred in the above state of unreality bordering on a secondary personality.

The outstanding trend in this secondary personality was a homosexual attachment to his father through which the patient unconsciously attempted to compensate his father for the insanity of the mother. This began to take form at the age of six years, twenty-six years before the patient came to analysis, because the patient had held himself responsible for the mother's insanity. In what turned out to be a continuous unreality for his secondary personality, he repeatedly referred to the mother's insanity as her death.

The patient related that two days before his mother was taken to a mental hospital from which she never returned he had pulled a chair from under her and she had fallen to the floor. The fact of this occurrence was corroborated by the patient's father, who stated that not only had the mother fallen to the floor but she had aborted as a result of it. There is no certainty that the insanity was precipitated by this fall because the mother had manifested minor aberrations previously. To the patient her permanent departure seemed death.

The unconscious homosexuality to his father had practically precluded all relations with women, socially or sexually, up to the time he began treatment. Shortly thereafter he began sexual intercourse with a prostitute. Many years later he reported that he felt himself unreal during this heterosexual indulgence and the unreality existed from the time he entered the prostitute's room until he left it. He, the patient, had not been present in the act.

About two years after he started analysis he married a Western girl socially his superior. Retrospectively he appreciated that after his marriage the feeling of unreality had been present when he entered his own home and especially when in the room with his wife. He could not feel the reality of his being a husband or the father of the four children born of the marriage. After the feeling of unreality had become conscious it seemed to him that it had deepened with the successive birth of each child. During this time he was aware of a feeling of unhappiness and depression, although he suffered from numerous conversion symptoms of the gastro-intestinal system—especially an expulsive diarrhœa—and the respiratory system—sneezing and crying spells.

Under analysis of what subsequently turned out to be his secondary personality, he underwent startling alterations. His homosexual components disappeared to the extent that they were almost negligible and his social contacts with both women and men became freer and more natural. It so happened that he succeeded his father as head of a

large firm and, as he grew better, when in his office he felt more real, or certainly very much more real than when at home or in mixed company.

When he first began treatment he and his father were occupying the same office. At that time, as already mentioned, he stood in profound unconscious homosexual subservience to his father. During the time of treatment he succeeded to the control of the business which automatically placed him in a position of authority superior to his father.

Some years later they moved to larger quarters, where he, as head of the firm, occupied the large main office and his father, now retired, a smaller one. The patient felt real in his own office, but immediately he crossed the threshold of his father's office, whether his father was present or not, a feeling of unreality enveloped him. The feeling of unreality deepened if he had to open the safe in his father's office—particularly when he turned the knob of the combination to unlock it. The moment the patient returned to his own office a feeling of relative reality also returned. The following explanation of the change in the reality experience is offered.

The patient had been dominated by a feminine identification and super-ego formation since the age of six when he had attempted to assume the rôle of his father's wife. The unconscious homosexual component had remained in his personality. As long as he could continue in his feminine rôle to his father no active struggle arose between his normal aggressive strivings, definitely present before the insanity of his mother, and his unconscious passive homosexuality.

When heterosexual strivings were liberated through analysis they clashed violently with his unconscious homosexual components. Originally as his father's wife he could remain contentedly feminine. At the beginning of analysis in the face of the heterosexual obligations in intercourse with the prostitute, it was necessary for him to repress the then dominant feminine super-ego in order to go through this critical test. The repression made him feel unreal. So, too, at a somewhat later period as husband to his wife, or father to his children, it was likewise necessary to repress femininity. Here, again, his loss made him feel unreal. His wife, a strong-willed, competent woman, continually challenged his masculinity and home to him represented a condition where heterosexual conduct was necessary. This, at that time, he could not psychologically achieve.

With this particular patient the overvaluation of exact thinking was so strong that any mistake in judgement was regarded by him with as much guilt as a severe moral lapse.

At a later period as a result of super-ego integration with the masculine ego, in his own office, where his masculinity was not questioned by his subordinates, he could be real. When in his father's office he repressed his masculinity, thus bringing about a transient feeling of unreality. This unreality made it possible for him to continue to act as a man (though an unreal man) in a place where formerly it would have been necessary for him to be feminine.

Only in recent years has psycho-analytic investigation broached the problem of depersonalization, and here one may mention the earlier work of Schilder (5), Nunberg (6), Reik (7) and, more recently, Searl (8), Bergler and Eidelberg (9), Feigenbaum (10). The omission of the problem of depersonalization is the more remarkable because of its close connection with such favourite psycho-analytic topics as dream and reality, thought block, resistance and object cathexis.

Notwithstanding the extraordinary range of Freud's own investigations of instinct drive and personality formation, he left the questions of depersonalization and personal quality almost untouched. But in 1937, in a letter to Romain Rolland, Freud (II) related a personal experience of a feeling of unreality or of doubt of reality as he stood before the Acropolis in 1904 while on a short vacation trip with his younger brother. He regards the occurrence as a defence reaction to a feeling of guilt connected with superseding his own father.

In his comment Freud again stresses the scant knowledge at present available of the cause of 'these very remarkable phenomena'. Continuing the discussion he states that the line from depersonalization leads 'zu der hochst merkwurdigen, "Double Conscience," die man richtiger Persönlichkeitsspaltung benennt'. 'Double conscience' as used by the French usually denotes a double consciousness and not double or crossed conscience (super-ego in the sense of Freud). Double conscience apparently more nearly corresponds to the concept of co-consciousness as described by Morton Prince (12). In at least one of my cases the patient recognized that the double or crossed super-ego registered or manifested itself co-consciously.

In the more extensively reported case I have attempted to indicate how in a male patient a feminine super-ego was superseded by a masculine. In the early stages of analysis when the feeling of unreality ensued the feminine super-ego was repressed in situations where the patient was called upon to assume masculine rôles. Later, when as a result of analysis the masculine identification and super-ego had gained in strength and stability, the feeling of unreality reappeared

in the situation where he felt unequal to appearing as a man in the presence of his revered father.

In the hope of lifting the obscurity which surrounds the problem of depersonalization, in this presentation I have offered certain examples of the persistence of reality feeling for isolated objects in patients suffering from unreality, and the appearance of unreality under particular conditions. In each case two—usually all—of the mechanisms mentioned at the beginning of the paper were actively present throughout the patients' lives. In stressing the factors of erotization of thinking and crossed super-ego foundation I do not wish to imply that they are alone responsible for unreality, but are regularly operative.

Recognition of these mechanisms furnishes, I feel, a means of penetrating unreality, a phenomenon which prevents patients from receiving the interpretations of the analyst. The more well patients of this type appear the sicker they are—for when they appear well the numbing protectiveness of their unreality is greater. This protective unreality in turn nullifies his therapeutic efforts.

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#### SENSE OF REALITY IN STATES OF DEPERSONALIZATION 147

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#### CRITERIA FOR INTERPRETATION

BY
SUSAN ISAACS
LONDON

#### I. INTRODUCTION

The question of the criteria by which we test the validity of our convictions in analytical work is one of great practical importance in the day to day carrying on of our work, as we reflect upon the progress and the resistance to progress of our patients. It enters into the discussion of controversial issues between analysts, since everyone who puts forward new contributions may and should expect to be challenged as to the basis of his views and the tests and verifications to which he has subjected them. Lastly it is of central importance in the statement of our theory for the non-analytic public, who have the right to challenge our premises and conclusions and to be shewn our methods of testing and verification.

It is my constant practice in training students of general psychology and child development to emphasize the key significance of method, and to shew that no hypotheses or conclusions can be evaluated except by reference to the methods upon which they are based. This is surely true with regard to analysis also, and not only analytic theory as a whole, but also the many detailed controversial issues in which we are all interested. In the last resort, differences of opinion as to fact and theory largely come down to differences of method, methods of discovery and methods of testing and verification.

#### II. THE MATERIAL OF OUR WORK

The psychological data upon which we form our judgements as to the patient's unconscious feeling, wish or intention, his forgotten history or repressed knowledge of present events, are not only very extensive but very varied in their nature. It is impossible to do justice to their variety and complexity in a brief summary. In outline they may be grouped as follows:—

(1) The facts of the patient's behaviour as he enters and leaves the room and while he is on the couch, including every detail of gesture and tone of voice, pace of speech and facial expression, any routine or any changes in behaviour and expression; every sign of affect, or change in affect, its particular nature and intensity, in its associative context.

- (2) His free associations, with every detail of content and verbal style, including any obvious omissions as well as what is actually said, and all the emphasis and distortions of emphasis. Special points are the repetition of previously recounted incidents and the affective and associative context in which this occurs; changes occurring in memory material or in the mode of reference to people or to circumstantial facts; idiosyncratic phrases or modes of speech; the patient's selection of facts and details for comment, noting omissions as particularly as inclusions, for example, regarding any real incident which has occurred in the analytic room, in public affairs, or in his own life or family history.
- (3) The patient's dreams and waking phantasies, together with all their associations.
- (4) His behaviour and attitudes to other people in the outside world, as reported by him or (sometimes) as reported by them or seen by themselves.

I would emphasize how much attention the analyst pays to behaviour in all the details of his work. As analysts we ought not to lend ourselves to the false antithesis between analytic and behaviouristic studies. This antithesis is useful to our critics, but it is false. Freud has taught us to appreciate sequences and connections in behaviour which escape the notice of other people.

#### III. OUR PERCEPTION OF UNCONSCIOUS MEANING

As we listen to the associations and note the behaviour and signs of affect of our patients, certain mental processes, partly conscious, partly unconscious, are evoked in ourselves. We may, for example, deliberately recall the end of the last hour as we note his material in the beginning of the present one, or make a deliberate effort to compare what he is saying to-day about a certain person with what he was saying a week or a month ago. On the other hand, memories of what he has said earlier, of the facts we have already gathered, come welling up spontaneously in our minds. We find ourselves evaluating directly, by unconscious processes, his mood, his affect, his attitude to ourselves. If our own minds are working freely so that we are alive and sensitive to the transference situation, not inhibited in our memory and our judgement of the present material or of the patient as a whole, if we can identify ourselves with the patient, with the whole patient, but not too closely or automatically with the particular facet he is presenting at the moment, the meaning of his words and conduct becomes

plain to us. Exactly in the same way as the patient's associations to the manifest content of the dream, bringing up new thoughts, new memories, new affect, new phantasies, break down the manifest content into apparently disconnected fragments and then rebuild these into a very different whole of dynamic significance, so does the material of the whole hour, or whole phase of analysis, yield fragments of meaning, of past and present significance which, as the hour or whole period unfolds, gradually form themselves into a new and more deeply significant whole. Sometimes it is a single remark revealing a specific phantasy or memory or attitude of mind, a single comment on a real situation, which gives the meaning to every detail of what has gone before, all the rest of the material then falling into place and becoming an intelligible whole. Sometimes this emergence of meaning is a gradual and cumulative process.

Now this becoming aware of the deeper meaning of the patient's material is sometimes described as an intuition. I prefer to avoid this term because of its mystical connotation. The process of understanding may be largely unconscious, but it is not mystical. It is better described as a perception. We perceive the unconscious meaning of the patient's words and conduct as an objective process. Our ability to see it depends, as I have said, on a wealth of processes in ourselves, partly conscious and partly unconscious. But it is an objective perception of what is in the patient, and it is based upon actual data.

In attempting to explain analytical work to non-analytic students, I am accustomed to give them a series of examples, starting from quite obvious ones which only the most inhibited person could fail to appreciate. For instance: a boy of five years of age, one day at a meal, addressing no one in particular, said in a very subdued way, 'I don't like dreams: they are horrid things'; and then, after a pause, 'and another thing—I don't have any'.

Now I find that every hearer, save the most obtuse, appreciates perceptually that in his denial the boy actually makes a positive statement, namely, that his dreams are so horrid that he wishes he did not have any, and cannot bear to remember them. The ordinary hearer does not set out his awareness of this in conceptual terms, as analysts have learnt to do, using it as a means of generalizing the mechanism of denial; but everybody perceives the immediate concrete meaning. From such an example, which the man in the street can read, one may pass step by step to examples of words and behaviour

which yield their meaning only to the analysed, and the analytically trained; but there is no essential difference in the process of perceiving the unconscious mind through overt words and conduct, between such simple instances and those we deal with in the analytic hour. The difference lies in the degree of education. By his own analysis and his cumulative experience of others, the analyst is trained to perceive meanings which would be obscure to the untrained mind.

Our perceptions become thus trained, partly by direct experience in our own analysis and in listening to others. We come to understand the various mechanisms of the mental life by living through them in ourselves and with our patients. But in part this education is conceptual, since we bring to bear upon our concrete material a wider knowledge drawn from more general studies, such as the facts of the overt sexual life among children and adults, the direct observation outside analysis of the talk and conduct of young children, and the systematized knowledge of their successive phases of development. If such knowledge has been well and truly assimilated, it works implicitly in our perception, in just the same way as his knowledge of the habits and plumage and distribution of birds is implicit in the perception of the ornithologist when he looks at a new migrant on a spring day. But at any moment in our work we may deliberately call up. in a systematic way, our knowledge of what people or children do at different ages, in reality or in phantasy, or the comparative facts of the sexual life, in order to judge whether some experience is likely to be a true or only a phantasied piece of history.

#### IV. THE TESTING AND VERIFICATION OF OUR PERCEPTIONS

I have claimed that our awareness of unconscious meaning in analytic work is of the nature of a perception; a perception rather than an inference. Yet like an inference it can and does receive confirmation or correction in many different ways.

Let us begin by considering what happens if our interpretation is incorrect.

As we know, interpretations can be incorrect in two ways: they can be (a) false, and (b) incomplete.

Unless we are the veriest tyros or 'wild' analysts, it is not very easy to make an interpretation that is completely false; it may happen to the beginner. If what we say bears no relation to the truth of what is in the patient's mind, it leaves him cold. Doubtless if we went on making statements that were completely untrue, the patient

would begin to do something about it. If we did behave in this way, it is certain that we should be revealing signs of affect in ourselves, either of doubt and confusion or of an obtuse and pontifical pseudocertainty; and to these signs of affect in us, the patient would undoubtedly react. His anxieties and disappointments would cause him to leave us and not return. That is to say, he would respond appropriately to the affective state in the analyst's mind which led to this stupidity or uncertainty or untruth. Such a situation would certainly mean that we had not listened to what the patient had said; it must be rare among trained analysts.

Far more common, occurring indeed from time to time in the experience of every one of us, is an interpretation which is false by its selection or by its emphasis; by being incomplete or by weighting too heavily one aspect of the truth to the detriment of another. We know that such incomplete or falsely emphasized interpretations may stir up the strongest responses in the patient. Signs of acute or unmanageable anxiety of one form or another appear, according to the patient and the specific nature of our error. The anxiety may be of such a form and degree as to hold up the analysis altogether, or to risk its breaking off. We are accustomed to read these responses as a sign that our words have expressed either a half or a distorted truth, and need addition or correction. If we can then bear to know our own limitations and to listen objectively to the words and ways in which the patient then expresses his anxiety, he will often shew us where our error lies and the specific nature of our mistake.

Each patient has his own way of doing this. One of my own, a woman, if I should miss an essential theme in the transference situation during one hour's analysis, or place the wrong emphasis upon one part of it, invariably brings me the missing or the under-emphasized theme the next day, fully worked out and elaborated in relation to her husband—either having been acted upon in the meantime, or merely felt. This happens in the clearest possible way; so much so that if at the end of an hour I become aware of such a mistake in my interpretation, but too late to rectify it, I can predict with certainty the character of her relation with her husband during the interval, and the nature of her associations at the beginning of the next hour. Such a mechanism gives one a very strong motive for avoiding these temporary errors, since they disturb the patient's external life so much; but it provides an excellent test of the truth of one's interpretations.

Other patients have other ways of doing the same thing for us—provided only that they have a general trust in our understanding.

To consider now correct interpretations: and to discuss, first,

- A. Interpretations regarding the *present*, whether unconscious feeling, phantasy or intention, or external situation: We get our confirmations and proofs in the following among other ways:
- (I) With preconscious interpretations, or those concerning external facts, the patient may give verbal assent. A child may actually say, 'Yes, how did you know—did someone tell you?' Or, 'How did you know—do ideas like that come into your head?'
- (2) Interpretations of unconscious trends may lead these to become conscious, if not at once, then after a time. Whereas the trend had previously been merely implicit in associations or in behaviour, there may now be conscious elaboration of images and the meaning of images, with conscious co-operation and appropriate affect.
- (3) There may be further associations which from their specific nature confirm our view, either by amplifying the unconscious attitude or phantasy which was interpreted, or by linking it with external situations in the patient's relation to us or to other people.
- (4) There may be a change of associations and of attitude such as we should expect, given what we already know of the patient's general modes of response, and of his specific mode of response to our knowing specific things about him. E.g. there may be a conscious repudiation, in such terms as to provide a confirmation, if it expresses guilt and terror such as would be felt and only felt if our previous interpretation had been correct.
- (5) The patient may on the following day bring a dream which carries on and elaborates and make much plainer the unconscious phantasy or intention which had been interpreted. Not only so, but he may recount a dream immediately upon our interpretation, one which he had not told us up to that point, but which had already been partially analysed before being told, some of its essential meaning having been expressed in the patient's behaviour on the couch or in his other associations, the relief of anxiety connected with this part of the latent content of the dream lifting the repression of the dream itself.
- (6) Memories of past real experience may be recovered as a result of interpreting present unconscious trends, memories which link these trends to real experiences and make both intelligible.
  - (7) Inferences as to external situations which had previously been

rejected by the patient may be admitted, or voluntarily brought up by the patient, after the interpretation of unconscious feelings or phantasies, these now being seen as responsible for the denial.

- (8) One of the most important tests of the correctness of our specific interpretations is the resulting diminution in specific anxieties. This may be shewn in a number of different ways. E.g. there may be bodily signs of relief from anxiety, such as relaxing of rigid muscles, stilling of restless or stereotyped movements, change in tone of voice. With a child we can see relief in his facial expression, voice, movement and bodily poise, as well as in the ensuing changes in his play, which becomes richer, freer and more varied.
- (9) The resolution of anxiety is seen also in the patient's associations, which may shew that the whole unconscious phantasy situation has been changed, with new material emerging as a result of the right interpretation. It is not, however, a matter of the mere lessening in amount of anxiety, but also of a change in its direction. New problems are opened up, with new anxieties, connected in specific ways with those just now interpreted. We learn to look for these specific connections, and to use them as a test of our interpretations. For instance, when phantasies elaborating the persecuting mother imago have been interpreted, and this anxiety is lessened, the patient may then be more able to take up a feminine position, identifying himself with his mother, both in phantasy and in memories; but this in its turn will bring up the anxieties connected with the sexual and aggressive aspects of the dangerous father imago; the analysis of these will bring then further relief, and change the internal situation once more, in a connected way.
- (10) These changes in amount and direction of anxiety have their greatest significance in the transference situation. It is what happens in the transference situation, indeed, which provides us with an acid test of the correctness of our perceptions. A valid interpretation may change the phantasy picture of the analyst from a dangerous to a helpful figure. In the case of a child, the room may have seemed to be full of terrible roaring lions; and when the meaning of this phantasy in reference to the child's dread of the analyst is interpreted, the lions become kind and friendly ones. Yet a valid interpretation will not inhibit the further development of phantasy, in the way in which mere reassurance will do. If interpretation has been both true and adequate, phantasies will unfold more richly, and memories stir more freely, whether in the play of the child or the words of the adult.

(II) We can often thus in many ways predict the course of the analysis, both its general course and its detailed immediate future. Such predictions, whether or not expressed, may be fulfilled in a manner that is both dramatic and of great scientific value, as testifying to the validity of our perceptions and conclusions, i.e. of our interpretations.

So much for our interpretations regarding present unconscious trends or real events.

Now to discuss our reconstructions of the patient's past history and past feelings.

We are led to infer such and such happenings in the past, by bringing together what is already known about his experiences with what he is shewing us here and now of his attitudes and feelings and behaviour to people in the present; and above all by his unconscious or preconscious attitudes to ourself as his analyst. A common source of evidence is the repetition of some early relation which has not yet been recovered in memory. The details of his behaviour on the couch, with all its affective colouring, often enable us not merely to infer that such and such happened, but that it happened at about such and such an age, since it is so characteristically the behaviour of a child of a given period of life. As a rule, we also have a circumstantial setting into which we can piece our interpretations and which links with our view of the original date of the behaviour now being repeated. The repetition of this piece of behaviour, often with an associated memory in a series of varying contexts, contexts with a certain quality of verisimilitude, enable us to infer a past real experience.

Confirmation of these inferences then comes in various ways: E.g. (a) New memories, either not yet told to us or long forgotten by the patient, emerge as a result of our interpretations; (b) such memories may directly corroborate what has been inferred, may be new instances of the same kind, or, whilst different, may yet be linked with our inferences, historically or psychologically; (c) further associative material may arise which makes intelligible the forgetting of this and other experiences, as well as present attitudes; (d) corroboration may be gained from outside sources such as friends and relations. Such corroboration from outside is not necessary for the analytic work itself, but it is useful from the scientific point of view, as an additional and independent proof. (e) We can correct our impressions of the past history of the patient by referring to our general knowledge of the actual behaviour of human beings at various ages, and the various phases of development, social, intellectual and sexual; having regard

not only to general characteristics at different ages, but also to the known range of individual differences.

Finally, in surveying our accumulated individual histories and knowledge of individual mechanisms for the general formulation of psycho-analytic theory, we have regard to such general principles of scientific method as the internal consistency of the various parts of the theory, and the scope and variety of facts which it articulates and makes intelligible.

This is by no means a complete account of our modes of testing and proof, but must serve to indicate their type and range.

#### V. PSYCHO-ANALYSIS AS SCIENTIFIC METHOD

Let us now consider the advantages and limitations of psychoanalysis as a scientific method, and its relation to other techniques of research.

It is clear that the relation of the analyst to the patient's mind is not and never can be that of the physicist or the biologist to his material. We are dealing with living minds, in a living relation to ourselves, and cannot stand outside that relation in complete detachment.

Moreover, our material changes from moment to moment. Our patient's thoughts and feelings and intentions do not stay still while we examine and compare them. The changes occurring are themselves part of our evidence. They not only bring us new data, but are themselves data by which we gain understanding of the patient's history and present life.

It is, however, increasingly recognized that the ideals of the physical sciences do not provide the true criteria of scientific method for the psychologist. This truth is admitted even by those observers and experimenters working in the narrower and more objective fields of the mind, the description of behaviour for its own sake, the laws of learning, the study of remembering and forgetting and imagining on the conscious level. Earlier attempts to force psychological methods into the mould of the physical sciences have proved sterile for the experimentalists. As one of the leading academicians recently pointed out, the experimental psychologist is bound to be as much clinician as experimenter. That is to say, he is obliged to recognize that he is studying the complex responses of a highly developed organism which have been called forth to meet the demands of a very unstable and varying objective environment. But if the environment is

violently simplified it is mere superstition to trust that the subject' responses also become simplified in a corresponding manner. They become different, but are just as likely to become yet more complex. 'Stability of determination, not simplicity of structure, in objective determining factors, is what we need to make our experiments convincing. Stability of determination is compatible with complexity and even with considerable variation of objective determinants'. <sup>1</sup>

In many recent academic studies of psychological phenomena in children and adults, attempts have been made to devise experimental and observational methods which are adequate to the complex and dynamic responses of human beings, without reducing the objective situation to a false and sterile simplicity. Such studies approximate more and more in this respect to the method of the analyst.

If stability of objective conditions be one of the demands which must be met by a scientific technique, how far can psycho-analysis pass this test? It can in one respect, but not in another. We do attempt to maintain a constant situation, one which approximates to the stable objective situation of the experimentalist; and that not merely with regard to the physical setting out of our work, but much more significantly, with regard to the psychological atmosphere. We do our best to keep our own attitude to the patient calm, objective and undisturbed by his words or feelings or behaviour to ourselves or to others. Our own responses to him, our real responses, as distinct from the patient's phantasies and feelings about us, are of a constant nature, with the single-minded purposes of understanding and helping the patient to understand. (Needless to say, I am not claiming infallibility for the analyst; neither he nor the experimentalist attains a perfect technique. I am speaking of the heart of the matter. When we fail, there are reasons for our failure, which it is our business to know about and correct if we can.)

Yet there is an essential and deeply significant difference between our method and that of the mere observer. We do not merely listen and record; we respond. And thereby we alter the situation as we go along. What we have to do for the patient is not to give him an indifferent experimental task which he may forget if he chooses the next moment, and which never has any personal meaning, but to say to him something which may be intensely painful or frightening or humiliating, something which he may have fought all his life not to

<sup>1</sup> F. C. Bartlett, Nature, August 31, 1929.

hear and not to know about himself; our words have the greatest possible dynamic influence and may change the situation almost out of recognition.

Even this does not, however, altogether stultify the scientific demand for constancy and objectivity of condition. We do not seek to effect changes in our patient's mind in the way in which the educator or the priest or the politician does. We do not aim to mould him according to our notions of what he should be like, but only to enable him to make his own changes in himself, by understanding his own deeper wishes and counter-wishes. We are not concerned with our own purposes, but with his. Since we tell him simply what he has shewn us of his own feelings or imaginings or intentions or thoughts, aim merely to make conscious his unconscious trends by putting them into words when he cannot do so for himself, we do in fact maintain a constant objective situation of friendly truthfulness, and truthful goodwill. And this constant atmosphere of truth and friendliness and objectivity is absolutely essential to our therapy as well as to our science. It is the only basis upon which the revealing and healing changes in the patient himself can occur. We have thus the strongest possible motives for maintaining it to the best of our abilities.

Another important element of scientific method is the isolation of the factors in any situation so as to get a differential response. Now this aim we cannot achieve in any detailed or deliberate way, being so much more observers than experimenters. And yet in one broad and significant sense, we are doing this all the time. The very constancy of the conditions we create, our own detachment and objectivity, provide an isolation. We tell the patient as little as possible about ourselves, reveal our private lives, our personal aims and values as little as possible, precisely in order to throw his into a high light. The purpose of our actual behaviour to the patient, those aspects of our real selves which do operate towards him, our goodwill, our friendliness, our tolerance, our dispassionate aims, our pursuit of the analytic aim and that alone, themselves further the scientific isolation of the patient's feelings, memories and phantasies, above all of his relation towards ourselves, as repeating and expressing his true unconscious aims towards his parents. In this way we isolate the psychological factors from the circumstantial. In the analytic room, we protect the patient's mind from such intrusive external stimuli, since we have found that it is only in so far as we are able to do this that his deepest

secrets will yield themselves up, and the so long buried phantasies and rejected wishes and hidden anxieties raise their heads and come forth into the light of understanding.

Another commonplace of scientific method is the repetition of situations, either by the original or by other investigators, in order that first conclusions may be verified or corrected. Now repetition in the strictest sense we certainly cannot have, since every experience changes the living mind, and every word or look of the analyst affects the patient's feelings and responses towards him. The patient's relation to us is not the same to-day as it was yesterday. We cannot have exactly the same situations over again in order to test and refine our interpretations. This difficulty is, however, not peculiar to psychoanalysis; it pertains to every significant type of psychological research. The mere appearance of experimental repetition was only created by choosing indifferent material and working with adults. No one working with children in any field can imagine that he may have an exactly similar situation to-day and yesterday and to-morrow. Time and growth and emotion are inexorable in their disturbance of the experimental machine.

Repetition does, however, occur in a different way. Every patient brings up the same essential situation time and time again, always with a difference, but with the same general structure—e.g. the same feelings and phantasies of fear or suspicion or defiance or over-compensated love or hate towards ourselves. Some have a way of repeating at successive phases of the analysis their tale of a particular incident in their lives. Such repetitions, part of the stuff of every analysis, give us a chance not only to note the new elements in the situation or story, with changes in affect, but also to confirm or modify our previous conclusions as to its meaning in the patient's history.

One of the essential difficulties of our work from the scientific point of view is that repetition by others with the same patient is impossible. In most other fields of psychology, it is possible to have more than one observer present, so that records and judgements can be compared. In analytic work this is quite out of the question, a serious handicap both for ourselves and for the general public. But we cannot alter this fact, and have to accept it as a limitation for pure science, imposed upon us by the very nature of the human mind.

To set against this very real scientific limitation of our work we can, however, place one of its great advantages, viz.: that the study of any one individual is highly intensive. In no other field of science

is the study of one organism, one mind, carried on for such a long period and in such an exhaustive manner. To set against the small numbers of our patients, we have the enormous mass of material with all the minute inter-relations of data. It is a misleading prejudice in the psychological field, brought from the physical sciences, to assume that number of cases is more important than conditions and detail of observation. If instead of persons we consider actual wealth of data, variety of situations, even mere number of hours of observation, then our work may claim a high quantitative status.

## SOME OBSERVATIONS ON THE EGO DEVELOPMENT OF THE FETISHIST

BY
S. M. PAYNE
LONDON

Freud first described the significance of the fetish in his classical work entitled *Three Contributions to the Theory of Sex*. He shewed that the fetish was a substitute for an infantile sexual object, and that the selection of the fetish object was influenced by a coprophilic smell attraction. In later works he emphasized the fact that the fetish symbolized the penis and its presence relieved the castration fear of the male which was aroused by the sight of the female genital.

In an account of a case of shoe and corset fetishism Abraham laid stress on the part played by coprophilic and scoptophilic impulses in the psychical development of the fetishist. Bálint recorded in a recent article his recognition of the fact that the fetish not only symbolizes a genital, male or female, but also has a fæcal significance.

I had made a similar observation independently while working on the cases which I shall refer to in this paper.

Freud's recognition that the presence of the fetish not only stimulated the man's sexual desires but also allayed his castration anxiety introduced a new approach, namely that of the relation of the fetish to ego defence mechanisms and ego development.

In this contribution I hope to shew (a) That the necessity to make a defence against an archaic sexual aim is one of the determinants of fetishism—the aim being to kill the love object; (b) to describe the type of situation in which the fixation of this sexual aim occurs; (c) to make some observations on the form of ego development which accompanies the adoption of this abnormal sexual behaviour.

I have had the opportunity of analysing two cases of fetishism and of observing work done on another case. I shall illustrate my paper from the analysis of a patient whose fetish was a mackintosh. I have been struck by the fact that the special type of sexual behaviour which demands the presence of a fetish is only one manifestation of a pathological mental state, which includes acute attacks of depression and anxiety, the presence of fears and phantasies of a paranoid type, suicidal tendencies which in one case were manifested first in childhood, and serious inhibitions. For this reason I shall state

briefly certain facts concerning the general psychological state of my patient as far as it is necessary for the understanding of the problem of the fetish.

In spite of the severe symptoms there was good intellectual ability and an attainment of success in life up to a certain point. Bodily activities, especially in the form of games and dancing were inhibited; occasionally hypomanic outbursts of activity in walking, riding and swimming occurred, but on the whole the only sustained form of activity involving contact with other people was in the form of conversation. My patient loved talking and obtained his chief pleasure in conversation. His attitude to the parents was characteristic. He was not financially dependent on the parents owing to his own successful exertions, but he retained an unusually strong sense of guilt and obligation in connection with them, which was not dictated by an immediate actual reality situation, as the parents were in a position to look after themselves. He manifested a dependence which made him regard the ageing parents with horror and anxiety; the signs of old age seemed peculiarly intolerable. On the whole, the parents and especially the mother seemed frightful to him, and the redeeming features only appeared when the analyses had proceeded a considerable way. The decay of the parents was as menacing as if they were actually part of the child and as if the child was responsible. He had an oral type of relationship to objects reminiscent of the neurotic woman who seems to be occupied in defending herself from the necessity to incorporate every external situation which arouses anxiety.

It has been recognized for a long time by psycho-analysts that the incorporation of an anxiety situation is a common mechanism of defence in childhood.

Recently Melanie Klein's work on ego mechanisms in the early phases of the œdipus complex has thrown light on the complicated relationships between internal and external situations which arise as a result of the interaction of the mechanisms of introjection and projection, and the tendency to internalize the anxiety situations.

Anna Freud draws attention to a special form of this reaction under the title of 'Identification with the Aggressor' in her book The Ego and the Defence Mechanisms.

When the mackintosh fetishist (whom I shall call Mr. A.) was confronted with an anxiety situation, which might be a rivalry in his work or the fear of the loss of an external good object, he invariably

reacted in the same way, and combated depression by eating to excess, usually sausages and eggs, and sometimes by drinking to excess; his behaviour had a hypomanic character. At the same time he tended to isolate himself and become an 'onlooker'.

Mr. A. was a sleep-walker and had been so from early childhood. His sleep-walking was accompanied by an anxiety dream in which he was in the act of swallowing something and he must either vomit it up or prevent it going down. Usually there were two objects which he was in danger of swallowing. In childhood he went to the lavatory when sleep-walking, and in adult life an alternative to vomiting was urinating or putting on the light. Sleep-walking occurred as a result of the same stresses as the excessive eating.

It was clear that he invariably employed the same method of ego defence in a situation in which he was in danger of losing a good object, and that was to incorporate the experience which stimulated the anxiety and introject the lost object. A simple illustration occurred during the course of the analysis; he was attracted by a ballet dancer and made sexual advances to her, but she did not respond readily and he retreated in anger. A close friend of his also approached the girl and was successful. He was quite open with his unsuccessful rival who manifested no jealousy and discussed freely all the intimate details of the affair. Some time later my patient saw the dancer unexpectedly and to his surprise he was overcome with embarrassment. He said he felt that he was experiencing the guilt reactions of the guilty couple, identifying especially with the girl.

It was possible in this patient's case to recognize different forms in which the necessity to incorporate and have control over the parents could take, and to shew how the infantile sadism was bound up with the necessity to have control over the parents and their imagos, and in this way to take part in their sexual relationship. My patient had slept in his parents' room until the age of five years. The analysis shewed that the sexual wishes were not separate from the fulfilment of death wishes, and while it was clear that there was a strong libidinal attachment to the parents it was equally clear that the aggressive component had come to dominate the unconscious situation, and that the inhibitions and restrictions of the ego were bound up with the persistence of an unconscious sadistic aim which involved the destruction of the love objects or his own castration.

Klein's work on children has enlarged our knowledge of the infantile sadistic aims, which include the wish to eat, to burn, drown, or soil with excreta and to penetrate destructively. The degree of aggression is partly proportionate to the helplessness of the ego.

The ego activities and functions which must be mobilized if the aims are burning, drowning, soiling with excreta or penetrating are to be realized were inhibited in these cases.

Mr. A. could not urinate or defæcate in any place where he might be seen or heard, and his fear of penetration was shewn by anxiety associated with intercourse and the symptom of ejaculatio præcox. He had not had satisfactory intercourse when he came for treatment.

In childhood there were phantasies acted out in which the boy aimed at obtaining control over his parents by urinating and defæcating and by eating the parent's fæces. These phantasies were not confined to infancy but were manifested at the age of four or five, and later in a setting appropriate to his age. For example, he flooded the garden with a hose pipe and walked about naked in it. At four he had an hallucination which he kept secret of seeing a man and woman kissing in a hedge where he and his brother used to urinate. The picture was in a flood of light.

Then he was given a magic lantern and was thrilled by the power it gave him to throw a picture anywhere he liked and move it about. In adult life he dared not use a camera partly because it had the unconscious significance of a sadistic magical penis which could devour and do what it liked with its victims.

Abundance of material shewed that sexuality was bound up with his sadistic phantasies concerning the parental sexual relationship and that the introjection of a sadistic primal scene and the experiences in the parents' room formed the core of his neurosis. The relationship between his parents was very bad, and separation took place when he was eleven years old.

He had been told many times by his mother that he nearly killed her at birth.

The infantile sadism aroused by jealousy and fear in connection with the parents' relationship is first discharged in excretory acts, urination and defæcation, and at the same time (as Melanie Klein has shewn) the parents' excreta and their excretory acts stand for their sexuality and are the objects of the child's sexual interest. In this situation the control of the parents become synonymous with the control of the sadistic id-impulses, which have been projected into parents, and internalized again when the parents are introjected.

The relationship to the introjected parents in my patient was such

that sometimes an identification with the mother and sometimes with the father dominated the picture, and it was easy to recognize which was prevailing.

He had entered the phallic phase and had partially regressed after puberty. The inability to establish adult genitality was due to regression to a fixation in the oral and anal phases, and the persistence of an unconscious primitive sexual aim, which involved the death of the love object or castration of himself. The weakness of ego development is one aspect of the weakness of genitality, and denotes interference with the libidinization, formation and integration of the body ego, especially of the penis imago. This brings about an exaggeration of the first mechanisms of defence which are employed, namely the projection and introjection mechanisms and an exaggerated dependence on the introjected objects, but no sustained identification with any.

It was possible in the case of Mr. A. to uncover a number of infantile situations which were concerned in causing the ego weakness and strengthened the dependence on the parents. I wish to mention these shortly because I think they demonstrate the kind of situation which helps to make infantile sadism unmanageable and therefore provoke neurotic defence mechanisms. The patient was bottle-fed. and there was no actual history of difficulty in feeding; if anything I should think his mother tried to overfeed him. He was circumcized at six months and nearly died of bronchitis shortly afterwards. He was rather fat and the doctor did not allow him to stand or walk until he was two years old. The fact was not remembered and was discovered in the analysis and confirmed by his mother, who said that he made the most distressing scenes and had to be tied down, and that he used to try to get up at night. The interference with the development of normal muscular activity, together with the circumcision and serious illness during the first year held up the integration and development of the body ego. Aggression is more easily discharged through the muscular system than in any other way, and the energy expended in learning to walk is probably greater than on any other function. The castration significance of the prohibition of this ego activity was stupendous and in my opinion played an overwhelming part in encouraging the relatively passive orientation which the defence by internalization shews, and increased the tendency to a feminine identification. The aggression normally discharged through the muscular system had to be focussed on excretory discharges which are also the main erotic outlet, hence the sadistic element of these

pregenital activities increased. An exaggerated fear of aggression, which represents the death instinct, is undoubtedly fostered by serious physical illness either of the child itself or of one of the parents. This situation was present in all the cases of fetishism which I have observed closely.

It has been recognized that libidinization of the penis imago is the basis of ego development, and at this phase it represents the ego. I think the erect position attained in standing in infancy and erection of the penis have comparable narcissistic values, and that castration fears are associated with a threat to either. The ego which cannot increase its strength by proving its own capacity actively is driven to reinforce itself by reliance on objects and continues to employ primitive methods of control, and is forced to submit to the parents and their internal representatives.

An attempt to deal with the helplessness is an adoption of magical means such as I have described in connection with Mr. A.'s eating activities and his use of the camera and magic-lantern. The presence of the fetish as a necessary accompaniment of sexuality after puberty is a further manifestation of the same phase of psychical development.

A study of what the fetish means to the fetishist reveals that it is possible to demonstrate that every component of the infantile sexual instinct has some connection with the fetish object, so that this object is associated with all the repressed infantile sexual experiences.

In the case of the mackintosh fetish the smell was connected with scoptophilic and coprophilic interests and activities, and with oral sadistic and oral erotic desires demonstrated in memories of chewing rubber teats, and eating fæces, sucking bull's-eyes and in innumerable dreams and phantasies. The texture of the smooth or rough mackintosh was connected with the stimulation of skin erotism, dating from a memory of his nurse's lap and of the examination of a little girl's smooth white genitals.

A vivid memory from the third year of life when he was forced to wear mackintosh paddling drawers was connected with exhibitionism, viewing and fear of castration.

Sadistic and masochistic impulses were manifested in anal or urethral activities in which a mackintosh or rubber object always found a place.

The prominence of the sadistic component was undoubted, and the necessity to control this component could be regarded as the OBSERVATIONS ON EGO DEVELOPMENT OF FETISHIST 167 factor which determined the distinctive mode of defence. The mackintosh is more obviously a protection than the shoe or corset.

The relationship of a man to his fetish is the same as his relationship to his internalized parents. Sometimes Mr. A. identified with the father, then he put on the mackintosh and would masturbate with a phantasy of intercourse with a woman.

At other times he put on the mackintosh and had a passive anal phantasy.

On other occasions the mackintosh must be present in the room when he masturbated. Sometimes he placed it over his genitals as if to protect them. He preferred a mackintosh which was stolen. In his relations with women he had no desire to penetrate if she had a mackintosh, and he regarded its presence as certain to produce the symptom of ejaculatio præcox. The general explanation of this was that the fetish reanimates the pregenital substitutes for genital sexuality, and also provides special defences against the aggression of pregenital sexuality. The aggression of genital sexuality although in reality of much less significance than that of the anal and oral levels may take on the aggression associated with pregenital sexuality if genital masturbation is precociously developed, as it is likely to have been in this case owing to enforced passivity and the resulting limitation of external interests.

The mackintosh fetish itself stood for the father's penis or the woman's genital, nipple, body, anal tract, or the parents' fæces.

In other words, it was symbolic of part objects and also of a combined parent imago. These imagos, as we all know, have special significance in connection with the earliest phase of ego development before relationships to whole or real objects are firmly established. Klein has pointed out that the introjected part objects are identified with fæces, and this identification is brought out in the choice of the fetish.

The fetish therefore stands for part objects which have been eaten, and also preserved. The internalized objects may have the significance of pre-genital super-ego formations and as we all know can be feared or loved by the ego. In the latter case the ego seeks protection and support from the super-ego and it may be said that the super-ego and loved object are identical.

When this internalized object is projected into the fetish, the latter represents the loved object and the super-ego.

In the case of the mackintosh its defensive and protective function rests on its capacity to defend against sadistic attacks, especially those

connected with excretory activities. It is interesting to note that the mackintosh will allow the child to excrete, that is to say to have a libidinal pleasure without injuring other objects. In other words, the defensive function refers to the destructive impulse, while the stimulating function refers to the libido.

The fact that the mackintosh, the chosen substitute object, is an object which actually functions in childhood as a protection against the disasters of that period suggests a measure of development of the sense of reality not present perhaps in the choice of other fetishes. In common with other fetishes it is a real external object and as a substitute for a love object denotes an effort to find contact with an external object and externalize an internal conflict. In this connection I had the opportunity to observe a tendency to develop a mackintosh fetish during the analysis of an obsessional neurosis. This patient, a man of twenty-seven, professed complete ignorance of the sexual act and of the anatomy of the female genitals in animals and human beings. His actions and thoughts were dominated by compulsive mechanisms of all kinds. After some months' analysis his repressed interest in both male and female sexuality and the genitals began to appear, and with this he started to dream of mackintoshes. It was as if the mackintosh heralded his approach to sexual activity and the genital which is the organ through which activity is experienced. I think that the fetish defence denotes that libidinal development has attempted to pass the anal phases, and that the phallic phase is partially reached. Repression falls on experiences connected with the phallic and anal phases. Actually memories of seeing the female genital at an early age were retained in my cases, but the knowledge of menstruation in childhood was repressed, and the evidence suggested that it was linked with repressed material connected with excretory activities. The identification of fæces and menstruation is commonly present. The prominence of oral mechanisms was due not only to an oral fixation but also to displacement from the genital and anal positions.

The attraction of the oral zone is due to the possibility of ego-syntonic activities and to the fact that ego development was partially fixated on an oral and early anal level, and had never satisfactorily passed the phase in which the helpless infantile ego is dependent on a good introjected object. The fetish representing as it does a combination of part objects, the combined parents represented by their fæces, and also in many situations the father's penis, stands for a good introjected object.

Any sexual potency which these patients could lay claim to depended on their unconscious belief in an introjected father's or brother's penis.

Actually from whatever point the problems connected with these cases are approached we are confronted with the weakness and dependence of the ego bound up with interference with genital potency, and I have been impressed by the importance of ego development in the first two years of life in this connection.

Klein's work on depressed states and their connection with an early phase of ego development is supported by the analysis of the psychical background of the individual who has the necessity for a fetish.

A real comprehension of the causes of this sexual anomaly can only be obtained by considering the fetish in its relation to the individual's whole psychical development and by taking into account the other morbid symptoms which are invariably present.

The relation of fetishism to a perversion and to neurosis is not a simple problem. Although fetishism is not actually classed as a perversion a study of the literature reveals a tendency to treat the two forms of abnormal sexual behaviour as if they had much in common. In my opinion the fetish saves the individual from a perverse form of sexuality. The component impulse which would prevail if not placed under special control is the sadistic impulse.

The fetishist has much more conscious anxiety and guilt than an individual with an established perversion, and in this respect resembles the psycho-neurotic.

The over-determination of the fetish both from the point of view of sexuality and ego defence can be compared to that of a neurotic symptom.

In common with phobia the mechanism of projection and displacement is used and a substitute object is selected, but there is a reversal of affect, as the object is to attract not to repel. The projection is for purposes of reassurance and to provide a good external object. It provides a reassurance that the sadistic wishes have not destroyed the objects.

The importance of the pregenital fixations is shewn by a recognition of the sublimations which are capable of replacing the fetish. In two patients it was literary work. One patient said repeatedly that he really loved books not the mackintosh. He collected books, and always wanted to defæcate when he entered a book-shop.

His literary work was inhibited when his sexual anomaly was

active, and when he came for treatment he was in danger of losing his power to produce books.

In an unpublished paper read to the British Psycho-analytical Society some time ago Ella Sharpe described the unconscious connections between a shoe fetish and the production of a picture.

The unconscious connection with artistic products is further evidence of the association of the fetish with the introjected imagos of the early phases of ego development. In conclusion it is abundantly shewn in this contribution that the psychology of the fetishist is dominated by castration fear, and I have traced this fear in these cases to infantile situations connected with unusual tension of the aggressive impulses inseparably bound up with sexuality.

# RÔLE OF THE FEMALE PENIS PHANTASY IN MALE CHARACTER FORMATION

BY

## SANDOR LORAND

#### NEW YORK

An artist past forty, of established reputation, had the following dream in the course of his treatment: 'I am walking in the red-light district, seeking a prostitute. Some approach me, walking on the opposite side of the street, but obviously going elsewhere, so that I cannot ask one to come with me. I go on. In front of a house stands a bearded man who lifts up his dress and shews me that he has a vagina. The hair is pasted on. . . . I get very desirous but feel it is not right, I ought to go on and find a woman; but I am afraid of being seen.'

Another patient, a professional man aged thirty-five, who was in treatment because of his sexual and character difficulties, related this dream in the latter stage of analysis: 'You (referring to the analyst) are bawling me out, saying I think very little of women, think they are inferior. Then you change into a woman—this is not quite clear—with whom I have intercourse.'

These dreams are cited as paradigms of the characteristic behaviour of certain patients, their social as well as their sexual attitudes. I refer to those patients one frequently sees, who have retained the phantasy of a female-penis so long that it has exerted a profound influence upon their lives. The specific elements in the dreams, as the figure of the man with a vagina who attempts to seduce the patient after he finds the way to women barred, or the analyst transformed to a woman with whom the patient has sexual relations—these are the subjects to be emphasized in this paper. For not only do patients of this type endow women with a phallus in order to avoid castration anxiety; they also attribute to men a female genital (or at least decidedly feminine traits) and for the same purpose.

Certain typical behaviour problems recur in the difficulties of these patients. Their attitudes towards women shew sexual, towards men, social maladjustment. They seem unable to endure frustration and use every means to avoid it by trying to make those men who are their superiors socially, in the family, or at work, behave leniently and indulgently to them. That is, they try to convert them into 'motherly

fathers'. They thus spare themselves the unendurable thought of being threatened or harshly treated.

The authors who have written of the problem of the female-penis phantasy have tended to overlook this aspect of the problem. I intend to emphasize two main lines of thought followed by these patients: first of which is, the desire to be passive as in childhood. Although this does imply the desire to be like a woman also, like a mother who is supported and cared for by the father, the wish is actually to be a little boy with a penis, at the stage when the child still believed in the universality of the penis. The second main line of identification, however, is with the father: to be active and aggressive, to replace the father. But this tendency reactivates the whole Œdipus situation and its resulting castration anxiety. Therefore, to do away with this anxiety, these persons try to weaken the father, win him over, and make him a less terrifying more motherly figure, gentle and loving. A father with a weak penis or with a female genital, as created by the patients whose dreams I have related; one we might call a vaginal father.1

At this point I should like to cite another dream of the first patient. He had been having difficulties with his wife which left him feeling extremely aggressive. His wife quite definitely represented his mother. After a quarrel an attempt at intercourse failed and then he had this dream: 'I had a vagina and my wife had a penis and we had intercourse'.

The associations to this dream and his own interpretation made clear the transposed identifications. In order 'not to burst with anger, not to kill,' as he said, he was compelled to weaken himself and let his wife assume the dominant rôle. It was the only way to keep the peace. He enfeebled himself in accordance with the pattern of his own childhood, when his father had been passive and his mother aggressive. By repeating that infantile situation, transposing his present life into that formula, he was able to keep peace in his own home.

Obscure and complex are the ways by which the child arrives at the concept of the female-penis, or rather at the stage where he must reject the idea of any difference between the sexes. The theoretical construction of this concept that the phallus is universal and

<sup>&</sup>lt;sup>1</sup> This term is one I suggested to Roheim in connection with the Australian custom of subincision of fathers for the purpose of winning over the boys from their mothers.

the manner in which under certain conditions the vagina becomes inacceptable, were formulated and established by Freud. No more complete explanation of these phenomena can be offered.

The whole of this complex phantasy is bound up with the castration anxiety: the boy refuses to accept the fact that girls have no phallus. Even if he should be irrefutably convinced of a girl's lack, he tries to console himself by insisting that it will grow later or that it was there and has been taken away. Thus the fear of castration enters the picture. Now if for any reason this fear is unusually strong, the task of moderating or reducing it may become a life-long struggle. Naturally, the pregenital situation—the experiences, attachments, frustrations—have already indicated the direction in which the Œdipus situation will develop; the subsequent castration anxiety at the observation of the female genital will also depend on the pre-Œdipus developmental phases.

In general, the family constellation proves to be of utmost importance in all cases of this type. The main features are an unconscious but strong attachment to the female members of the family, particularly the mother; and at the same time a repressed hostility to the father. The unconscious tendency to castrate the father is paralleled by a similar tendency to self-castration as an attempt to placate the father. As these persons are hypersensitive and unable to endure frustration, their constant if unconscious aim is to restore the placid emotional atmosphere of childhood. This aim finds expression in a continual shift of identification. Having only a weakly developed character of their own, they want to be (and therefore are) like both parents at once, a phallic mother and a vaginal father.

An important factor in the development of these female-penis phantasies is the lack of child companionship. Almost without exception the patients under my observation had had no contacts with other children during their formative years. They were usually the youngest child in the family and their only playmates were much older siblings, nursemaids, or parents. Consequently their opportunities of satisfying sexual curiosity were limited. They were unable to make comparisons with children of their own age, and the rare glimpses they could obtain of the adult genital whether male or female, obscured by the pubic hair which figures largely in their phantasies, mystified rather than enlightened them.

Some of the patients observed had consciously persisted in their belief in a female phallus until puberty, despite what one might have supposed would be insuperable obstacles. Two men in particular exhibited this fear of credulity, one to the age of eleven, the other to the age of thirteen. The latter slept with his grown sisters, lay on top of them attempting intercourse *inter femora*, always seeking something. (But, as he recalled, the object sought was not the penis but the testicles.)

Another patient, apparently well adjusted in his marriage but actually dependent on polymorphous perverse manipulations before intercourse, centred his whole sexual life around the act of sucking. The clitoris or breast were his usual objects, but he enjoyed fellatio when he was the active partner or the seducer. If he took the passive rôle he felt anxiety, not gratification. Even after two years of marriage this man was satisfied with intercourse without penetration.

Characteristic short dreams of his:

'I am sucking my wife's penis'.

' I am in a room with my wife. She has a good-sized penis which I am sucking '.

'I see a stump in the vagina. It is dirty and I am disgusted'.

If a woman lay flat so that her breasts were not prominent, that alone was enough to make him impotent with her. He felt that a penis (to which he equated the breasts) would not have disappeared. It made him painfully aware of the possibility of castration, as a dream illustrates: 'I am lying in bed with a woman. I feel her chest and realize that she has no breasts'.

This man's earliest playmates had been his older sisters and his nurse. His constant aim was to endear himself to other persons, men and women both, and he always succeeded. As his wife quite definitely represented his mother, intercourse with her was accompanied by anxiety and often by phases of impotence. The wish to satisfy women, to be loved and praised by them, was of the utmost importance. He was the 'cute baby' with whom they played; while in intercourse he took another rôle, that of the (mildly) aggressive father. And when he indulged in fellatio it was always with the unconscious wish to please or placate men in order to gain their support or love.

In his homosexual activities, in which he engaged at rare intervals before he came to analysis, only fellatio played any part. He employed all his charm, intelligence, and power of persuasion to get his way with men; he weakened and 'castrated' them and made them like him. He actually reproduced thus the pattern of his childhood relationships with his father and uncles, whose favourite he had been.

Another patient of this type explained his equation of breast and penis, which caused him in phantasy to endow everyone with a breast by saying, 'If everyone has a breast, then everyone has a penis. Then even if I have no mother to get the breast from, I can get it from father'. This patient suffered severe headaches during intercourse. He described them as 'splitting' headaches, which in analysis proved to signify a substitute for splitting the penis—either castrating himself or splitting it in two and converting it into a vagina.

This patient's education was under the strict direction of his domineering father, of whom he was mortally afraid. But sometimes his father also pampered him, and at a very early age he had learned to employ conscious devices to disarm his father whenever he was to be punished. In his profession he maintained the same attitude and eventually became disturbed by the feeling that he was passive, always expecting favours, but never getting them—at least not to the extent he would have liked. However, he remained unable to make demands because of the deep-rooted fears growing out of his castration anxiety.

Such problems and strivings were prominent in all the patients. From the time his sexual relationships began, the artist, whose dreams I have cited, had had to struggle with homosexual impulses and phantasies. Cunnilingus, with emphasis on sucking, marked his heterosexual relationships; it gratified him to know he was able to excite and satisfy women in this manner. He was able to have intercourse without preliminary manipulations, as if he needed to be encouraged and seduced. Analysis revealed that his sexual activity had two phases. In the first he took the rôle of the baby with infantile strivings for playing, sucking, and being loved—a passive rôle. In the second, that in which he accomplished intercourse, he was the grown man, the (not very) aggressive father. The guilt aroused by unconscious castration tendencies directed against his father made it impossible for him ever to succeed in or enjoy his relationships. Intercourse itself was tinged with various sadistic phantasies of spearing or smothering the woman.

In the course of analysis this patient became astonishingly active in social life, in great contrast to his previous reserve, and more potent sexually than he had ever been without any preliminary play or manipulations. The reason, as must be obvious, was his dependence on the analyst. I must add that throughout his treatment the attitude of the analyst had to be a very gentle one, because of the severity of the patient's condition.

It is significant that this patient had had a severe infantile neurosis when he was four or five years old, in which he had been troubled by fears which could be calmed by only one person, his father. From the age of sixteen, when he began to earn money, he became the chief support of his family. This was a position in which he could enjoy his favourite double rôle: in one sense the father who provided for the whole family, parents and siblings older than himself; in another the petted baby, eager to do everything for them in return for their affection and appreciation.

In fact, as work was play for him he could be a playful child in it. In a sense it gave him a sexual gratification equivalent in masturbation. It was an aggressive play, however, and his art was a means of carrying out his castration tendencies. A dream will illustrate what his art meant to his unconscious: 'I am submitting some drawings to a comic magazine. A woman is driving me there in a car and urges me to take them in to the editorial office. I do so and there I cannot sign my name. I feel that the drawings will not be accepted and the editor then remarks, "They are jokes with gangster themes, with the content of father-son murder".'

The following dream illustrates how the female penis concealed in the vagina really stands for the father's phallus: 'Father has hidden a knife in the vagina to revenge himself'.

Another dream, the associations to which shewed the oral origins of his perverse cunnilingus tendencies; 'I am eating and wiping up the dish with my phallus'.

Another patient, an intelligent young bank clerk, dreamed that he was playing ball with girls who wore bloomers under their skirts, which he lifted. One of the perplexities of childhood for him had been the fact that girls wear both skirts and pants. His sexual relations never exceeded petting; indeed, as far as he was concerned, girls had no bodies below the waistline. But he was interested in the upper parts of their bodies, especially their breasts. He was also intensely interested in, and sometimes masturbated with images of, strong male chests, as of boxers or wrestlers.

This man remembered his father as a domestic tyrant who kept unrelenting watch upon him, while his mother was always kind and indulgent. Yet although he lived in fear of his father, he still wanted to be like him: athletic, rough, and strong. Analysis revealed the presence of a firm pregenital fixation. He was the youngest child and his playmates also were nurse, older sister, and mother.

In one dream he told of seeing a woman's figure draped in a long Grecian tunic, reclining in a position that emphasized the contours of her breasts, while a similar contour protruded from the genital region. The glimpse of a girl's nipples or the suggestion of breasts through a dress, greatly excited him. He made a significant slip of the tongue in connection with a dream, saying, 'Wenn man Kind ist, hat man keinen Penis'.

Characteristic of his concept of female sexuality is the following dream about transformation of male into female: 'I am in a wood and see before me a large space entirely bare of trees. The analyst points out many stumps of trees that have been cut down. I examine them. The stumps are yellow, the annual rings black, and they contract and dilate like the pupils of the eye. Nearby stands a real lion that somehow conveys the impression of being a heraldic animal on a coat-of-arms. He has a benevolent look'.

Another dream: 'I am on the deck of a ship with girls. I want to convince one that I have an erection, but cannot. Then she tries to alight on top of me and says, "This is an erection" showing me her rigid penis. I want to seize it, but she runs away and I wake with an emission.

Another dream, typical of the tendency to convert men into women in order to be protected, referred to Dr. Brill. (I relate it in German as he told it.) 'Brill verwandelte sich in eine alte Frau mit Brille und sieht sehr mütterlich aus '.

This man's strong attachment to his mother and later castration fear, turned him to the father he so greatly feared. But he tried to endow his father with motherly characteristics so that he would love him as well as dominate him. Witness of his early oral attachment was the fact that he often awoke from a dream sucking his finger.

A young lawyer who had believed in the female penis until the age of eleven, suffered from ejaculatio præcox. He related these dreams: 'Women with penises were having intercourse with each other'.

Also, he dreamed that a girl was undressing in his presence and he put his hand on her breast. Then he invited her into an adjoining room. She said she would charge him for it, to which he replied, 'you are no whore'. He looked down and saw she had a penis, but when he called her attention to it it began to grow smaller.

Another young professional man who suffered from sexual impotentia had fantasies of attaining economic security by performing

some great deed that would put him in a favourable light with a prominent person who would then become his patron. The approval of others was tremendously important to this man. He was always eager to please, to serve, to carry out tasks and do favours requested of him. The fact was, that he could derive self-confidence only from the appreciation, admiration or love of others. He was very sensitive and easily enraged but he concealed his feelings with a smile. He was occasionally teased for blushing whenever something complimentary was said of him or when the conversation touched upon a trait or act of his.

The source of his difficulties was the constant struggle with his feminine trends. Characteristic of his attitude was, on the one hand, a constant preoccupation with sex, on the other, a constant flight from it. In his unconscious he was not certain whether he himself was man or woman. For example, he dreamed that he saw a boy who resembled a woman, with a man's chest but a woman's face and long hair.

Although he seemed hypersexual when he spoke of frequent relationships with his girl friends, it soon became evident that this hypersexuality was an escape tendency, with the purpose of concealing his weakness and inadequacy; a flight from unconscious homosexual and perverse tendencies. His sexual urges were of a compulsive nature, to relieve his inner tensions. His pleasure in love was primarily narcissistic and the woman he sought so persistently was the mother-image. Although he succeeded in repressing his perverse impulses in compliance with social demands, this patient could not altogether prevent their outward pressure from distorting his behaviour in society or in private life.

His difficulties were the results of an early family structure which had had the effect of maintaining, along with his masculine personality development, an equally strong feminine tendency. The youngest child and the only boy, he had been left fatherless in infancy and his over-solicitous mother and sisters babied and pampered him until he was grown. He had no recollection of his father and grew up completely under the domination of his mother. And, as often happens with men who have a weak father or none at all, he developed definite homosexual tendencies. He identified himself with his mother, who represented both parents, therefore he loved both parents in one person. At the same time, as the only boy, he had unconsciously been compelled to accept the father's rôle of the man of the family.

The result was an unceasing fluctuation in his character between masculine and feminine tendencies.

Naturally, his deep unrestrained attachment to his mother gave rise to fears about sex. Associated with these fears was a distrust of women, the consequence of early phantasies that his mother had somehow been responsible for his father's death. Thus, while he continued to want his mother and to seek reassurance in the love of women, he could never quite satisfy this craving because another feeling within him opposed it: the feeling that women are not to be trusted because they frustrate. For his early experiences had included frustrations by the mother in addition to the pampering.

From the distrust he felt arose sadistic tendencies which appeared in his behaviour as their opposite, as masochism. He seemed to be shy, timid, repressed. But beneath this deceptive manner were phantasies which disproved the disguise of masochism. In fancy he dissected women, cut off their breasts, forced them to stand in torturing positions while he had sex relations with them. The masochism to be interpreted as self-punishment for these sadistic ideas. But his actual meekness was revealed in phantasies expressing the primary desire for help and dependence. For instance, he imagined that while driving his car he would be able to help Mrs. Roosevelt in an accident. As a gesture of gratitude she then would help him achieve social and material success. Or he would save some girls from kidnappers, after which he would be universally admired and get a better position. One phantasy he remembered and often returned to, dated from his high-school days: A cave, cozily fitted out with all necessities, to which he could retire whenever he wished and be hidden from human eyes.

An important factor in the development of homosexual tendencies is often that identification is made with the person from whom the most frustrations are experienced. In his case that person had originally been the mother who loved and attended him. Thus the aggression primarily concerned his mother and hence all women. Even consciously he considered all women dangerous castrators, socially as well as sexually—persons to be dreaded and avoided. He himself said, 'It is remarkable that half the people in the world have no phalluses, so they are out after those who do have them.'

His personality was permeated with infantile traits arising from his unconscious erotic drives. Sometimes months went by before it occurred to him to take a bath. He never thought of brushing his teeth, and not even owned a toothbrush for years. His phantasy enabled him to enjoy all his inhibited desires, especially those concerning the mother.

A characteristic dream of his: 'Two girls were looking at their pubes. They were full-grown, but did not have enough hair. My mother was there too. She had a penis but it was no bigger than mine'. In this dream the patient was consoling himself with the thought that if his penis was not comparable to that of a grown man, it was still large enough to compete with his mother's. In childhood he had always wanted to equal his mother.

The phantasy that the penis was present but concealed in the vagina was expressed in this dream: 'I am looking for a camera to be attached to the tripod I carry folded up in my pocket. I ask a man to help me find it. It is a small Brownie which I used at home. When I find and open it, I see five cigars inside, which makes me very happy'. Here we see the tendency to seek help from the father (or a man) in the attainment of the sexual aim.

The conclusions to be drawn from these cases would be incomplete without the additional observations made since I first presented his case (at the Oxford Congress of 1929) on the child fetishist then discussed under the title, 'Fetishism in Statu Nascendi'.

This child's unusual struggle to deny the reality of the female genital was revealed in his habit of crawling under tables to peep under women's skirts and stare at their shoes. He seemed fascinated by shoes. At that time he was greatly attached to his mother and terrified of his father. The boy is now in his thirteenth year, and although he has been seen occasionally for various nervous habits, he has never been in analytic treatment because of the father's objections. At present his mother has receded into the background of his life and all his interest centres round his father. True, he has occasionally invited his mother to see how big his penis is, and recently he said to her, 'I love you mother, but it is too bad you have to be a girl'.

But all his interest and cameraderie are for the father, whom he kisses passionately, in whose room he sleeps, and whom he coaxes and wheedles into buying him all sorts of things. He still insists on being waited on, but it is now the father who serves as medium through which all the boy's gratifications are obtained. He is now as jealous of his father's affection for his mother as he was at the age of four, of her love for the father. He deals with his castration fear of the father

by winning him over, by actively 'castrating' him, making him an indulgent, motherly figure. At the same time the boy castrates himself: he does not want to have anything to do with girls and even refuses to talk to them in school.

A careful study of all these cases makes plain that their disturbances began in infancy as a result of the mother's attitude. In that period which we term pregenital, when the object relationship is almost wholly with the mother, the breast-penis equation has its origin. The fantasy of the mother's penis reaches its height in the actual Œdipus period, the stage at which there are definite phallic strivings towards the mother. Consequently, although the castration anxiety may have begun in the pregenital, it becomes stronger and definitely connected with the father at the Œdipus period.

Our knowledge of personality development in early childhood indicates that the influences of affection and frustration shewn the child, and the anxiety with which the child reacts to the person who shews them, will be the decisive factors in the child's later adjustment to love and social relationships. If that first object relationship has a strong sexual tinge, and the attachment to the mother persists into the Œdipus period, anxiety will result.

That anxiety will also be responsible for maintaining in the child a weak ego; that is, one that will tolerate considerable infantile sexual expression; and subsequently be the battleground of conflicts between that tolerance and any attempt to reject or inhibit such trends.<sup>2</sup>

These will be the persons I have described here, those who seek to preserve at all cost their peace of mind against castration anxiety.

Naturally, the characteristics ascribed to these persons by the various authors who have written on the subject are also valid: they are strongly oral types; they do exhibit definite anal characteristics as well. In their sexual life the drive for both oral and anal gratifications is outstanding. However, my intention in this paper has been primarily to study that one important attitude so typical of their social life. I refer to the quest for the motherly father, the man on whom they can depend more safely than on women; by appeasing whom they can master their castration anxiety, which is the decisive factor in their whole personality structure.

<sup>&</sup>lt;sup>2</sup> Freud, Vorlesungen, Vol. VII.

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# **ABSTRACTS**

#### GENERAL

John Rickman. 'The Medical Section of the British Psychological Society' (appearing in series: 'British Medical Societies: Their Origin and Development'.) The Medical Press and Circular, September 7, 1938.

An informal journalistic history. Beginning with the rise of psychology in England, and discussing the part played by the remarkable Cambridge group (Ward, Rivers, Myers and McDougall) in founding a practical, experimental plus anthropological plus clinical plus applied-industrial kind of psychology in England; this history also outlines the parallel development abroad of psychopathology, and of the reorganization of the British Psychological Society into a body all-embracing but also sectioned. It shews the incursion of psychology (fired by the discovery [!] of mental pain, anxiety and guilt—a contribution of Freud) into fields hitherto regarded as unrelated or where the links were (if seen at all) felt to be rather ineffectual, viz. anthropology, criminology, law, sociology and even education and psychiatry.

This brief account, written for a general medical journal for general medical practitioners, manages to convey something of the way in which mental pain came to be included in the purview of mental science.

Author's Abstract.

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Thomas M. French. 'Reality and the Unconscious.' Psychoanalytic Quarterly, 1937, Vol. VI, pp. 23-61.

To explain wish-fulfilment in dreams and neuroses real memories are needed in addition to the wish. Reassurances cannot be created but must be constructed from actual past experiences, and any distortion of reality by dreams or symptoms in failure of reassurances will be followed by a compensatory tendency to correct such distortions. The fundamental differences that distinguish rational waking behaviour from neuroses and dreams are based upon the quantitative relationship between the ego's capacity for synthesis and the intensity of conflict. Neuroses and dreams deal with conflict in a fragmentary way, repeating, because of the ego's inadequate synthetic power, previous reactions to the traumata. Rational behaviour requires an ego span sufficient to view the total situation and also to pay attention to differential criteria so as to be able to learn from past mistakes instead of repeating them.

Lucile Dooley.

J. F. Brown. 'Psychoanalysis, Topological Psychology and Experimental Psychopathology.' *Psychoanalytic Quarterly*, 1937, Vol. VI, pp. 227–237.

The possibilities of co-operation between the psycho-analyst and the topological psychologist in establishing experimental procedures in psychopathology are examined. Similarities and differences between psycho-analytical and topological methods are pointed out and some existing experimental procedures are mentioned as having implications significant for psycho-analysis.

Lucile Dooley.

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W. Bischler. 'Intelligence and the Higher Mental Functions.' Psychoanalytic Quarterly, 1937, Vol. VI, pp. 277-307.

An attempt is made to apply the concepts of psycho-analysis to intelligence and the higher mental functions. Intelligence, consciousness, intuition, perception, reasoning, logical comprehension, social aspects of language, understanding, invention, judgement and interpretation are considered. An analysis is made of the mental processes, the psychic dynamisms, the instinctual forces and fundamental impulses entering into each of the higher mental functions, with clarifying illustrations from psychopathology.

Lucile Dooley.

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William Brown. 'The Psychological Basis of Ethics, with some Observations on Group Morality.' Character and Personality, 1938, Vol. VII, No. 1, pp. 1-13.

This paper is an attempt at reformulation of the relation of psychology to ethics. Kant's formulation, 'I ought, therefore I can', is discussed, and the reverse suggested, 'I can, therefore I ought'; that is, our duty has to be related to our powers.

This theme is developed through psycho-analytical theory, and the relation described between the 'ought' and the super-ego. Next the 'ought' is applied to the Group, and democracy and nationalism discussed in relation to it.

R. A. Macdonald.

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### CLINICAL

John Rickman. 'Panic and Air Raid Precautions.' Lancet, 4, vi, 1938, p. 1291.

Freud's fourfold ætiological formula used for panic; external danger

CLINICAL 185

not 'the' cause. External danger mobilizes aggressive impulses, if there is no immediate opportunity for outlet the mind when dealing with the increased mental tension is forced to effect a redistribution of love and hate cathexes; perhaps an incapacity to do this rapidly enough is the specific cause of panic.

In panic self-control is lost and social bonds are broken. Ordinarily members of an organized group have distributed their love and hate in recognized and safe channels; the dissolution of group cohesion (panic) may bring those near and dear to the self within range of (formerly distantly projected) hostility; i.e. breakdown of group system has personal as well as social consequences. Panic adds guilt to the already disturbing anxiety, and less of capacity for constructive activity for loved objects in danger increases mental anguish.

In panic larger-group loyalties is often lost while loyalty to smaller-groups remains: this libido shifting is done to diminish mental strain, it is commonly regarded by Central Authority as rebellion or disaffection.

Air raids likely to produce strain from two sources: external and internal dangers. *Internal dangers* chiefly due to mobilization of infantile phantasies with accompanying anxieties and guilt, particularly aggression against loved objects.

Psychological Precautions: since panic is not a new thing but reawakening (in modified form) of infantile anxieties those measures found efficacious in infancy may be applied to meet panic problem of adults. Four main measures (then as now): (a) Membership in a group: panic best allayed by doing something for those one loves, i.e. contributing to security or comfort (mental and physical) of group. Manipulative activity (itself satisfying, i.e. calming) is here yoked to social purposes. (b) Mastery of sources of danger: this includes all activities (not only shooting down bombers and dowsing conflagrations) which turn activity outwards if in service (phantasied or actual) of the community. (c) Diminished reliance on magic: magic is dangerous because of its independence of external reality (amulets proving ineffective against H.E.) and because the magical remedy (belief in a High Protector-God, Government or Talisman) may be suddenly doubted, when as suddenly self-confidence—and all confidence -collapses. (d) Relation to Authority: the Government (parents in the nursery, the Executive in the State) must (i) govern, i.e. deal fairly as between child and child, as between class and class; and (ii) protect. It must provide food (in panic there is infantile regression and food spells security); it must take the lead in active defence against enemy attack and thus show a vigorous face against the evil without (which helps also to combat fear of evil within). A respected Government is necessary for social security in time of danger, and that respect is willingly given if it is deserved. Summary: panic not a new experience but recrudescence of

infantile anxieties; measures then adopted unconsciously to deal with individual panic should be the basis for consciously planned anti-panic measures in adult community in time of air raid risk.

Author's Abstract.

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Otto Fenichel. 'The Conception of Trauma in Present Day Psycho-Analytical Theory of Neuroses.' *Internationale Zeitschrift für Psycho*analyse, Vol. XXIII, Part 3, pp. 439–459.

A neurosis is fundamentally a discharge of accumulated excitation which the ego either rejects, or of which it is not aware. Excitation can be accumulated by an increased influx in the time-unit (traumatic neurosis), or by a diminished discharge as a result of fear of the external world, or of command of the super-ego (psycho-neurosis). There is a particular link between neurosis and anxiety. Anxiety is a signal of threatening danger. The term 'danger' means that the ego considers a certain situation a potentially traumatic one. The signal, i.e. the anxiety, might increase to such an extent that the presumed danger turns into a trauma. increase of the anxiety-reaction is due to chronic inhibition of discharge which leads to damming up of libido. The signal might thus fail, and the danger necessitate a defence against anxiety. Referring to traumatic neuroses the author mentions two types of traumata: external and internal ones. The importance of impulses as a source of danger is discussed. This danger is twofold: the external world might interfere, or the apparatus which provides satisfaction might fail. The author quotes the work of Melanie Klein and other English workers who maintain that the small child is inevitably exposed to traumatic situations. By remembering situations in which impulses were not satisfied the ego becomes hostile to these impulses, and suppresses them in order to avoid a similar frustration. The defence against impulses, however, is not explained by reducing it to the occasion when it first occurred. It is one of the achievements of psycho-analytical research that neuroses result from later experiences. Anna Freud, in speaking of a primary hostility of the ego against impulses, means, according to the author, a similar mechanism. It is based on memory-traces of traumatic situations which occurred at a time when the apparatus which provides satisfaction was not yet fully developed, and failed. The author rejects these hypotheses, as he cannot see any reason why a human being should have such an anxiety once the apparatus providing satisfaction is fully developed. A further step is that the fear of internal sensations is interpreted as 'introjected bad objects'. The author gives a number of examples of anxiety and discusses them in their connection with trauma. Overwhelming excitation is the main object of fear, as under its pressure the ego threatens to break down. Reich points

out that orgasm consists of two phases, a voluntary and an involuntary one. The latter phase is experienced in these cases as a breakdown of the ego, and thus pleasure turns into pain and anxiety. If we were to assume a primary hostility we would have to ask how the fear of a breakdown in the ego is normally overcome. The author, however, is inclined to assume that a normal person is capable of orgasm, and the question would then not be how this normal state arises, but what events make an individual incapable of experiencing orgasm as pleasure. Two events are possible which can produce such an incapacity: (1) Real or projected prohibitions will create defences against impulses, and block the normal path of discharge. (2) Traumata produce greater quantities of excitation than endogene impulses. Infantile traumata are capable of emphasizing later prohibitions and vice versâ.

The distinction between traumatic neurosis and psycho-neurosis is only relative. A traumatic neurosis is never isolated from conflicts of impulses while a psycho-neurosis accumulates impulses on account of anxiety. Anxiety offers a link to traumatic neurosis because it is a judgement anticipating a danger, a sort of memory of a passed traumatic situation. Furthermore there are mixed cases which have traces of a traumatic neurosis and of a psycho-neurosis. These cases are particularly difficult. A trauma experienced with comparatively little co-operation of impulses will only be revived when the particular situation is repeated, and usually disappears after some time. If, however, the trauma is linked up with sexual excitation the neurosis cannot heal spontaneously as the traumatic conflict is revived by the sexual impulse which physiologically increases at intervals. The patient finds himself involved in a vicious circle as long as the sexual excitation appears as a danger.

H. A. Thorner.

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Helene Deutsch. 'Absence of Grief.' Psychoanalytic Quarterly, 1937, Vol. VI, pp. 12-22.

The author presents four analysed cases in which the reaction to the oss of a beloved person was a complete absence of the manifestations of mourning. Since the death of a love object produces reactive expression of feeling in the normal course of events the omission of such a reactive response is to be considered as much a variation from the normal as is excess in time or intensity of mourning. Grief not manifested in the recognized manner will be found expressed to the full in some other fashion which will be continued until mourning is somehow carried to completion. The absence of mourning may be the result of an effort to defend the weak ego by excluding a grief that is unendurable. It may come about by a submission to other, opposed, claims on the ego, which succeed in excluding

grief. Mourning may be suppressed because of previous emotional conflict with the dead person. 'Probably the inner rejection of painful experience is always active, especially in childhood. One might assume that the very general tendency to "unmotivated" depressions is the subsequent expression of emotional reactions which were once withheld and have since remained in latent readiness for discharge'.

Lucile Dooley.

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Lawrence S. Kubie. 'Resolution of a Traffic Phobia in Conversation between a Father and Son.' *Psychoanalytic Quarterly*, 1937, Vol. VI, pp. 223–226.

Along with the boy's fear of traffic were found anxiety concerning the penis and jealousies of the father-mother relationships. Therapy was effected by simple conversations between father and son, in which the child was able to raise questions and issues directly and to receive answers dealing solely with realities comprehensible to him.

Lucile Dooley.

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Charles W. Tidd. 'A Note on the Treatment of Schizophrenia.' Bulletin of the Menninger Clinic, 1938, Vol. II, No. 3, pp. 89-93.

An' Interpretative Diagnosis', essentially the psycho-analytic summary of the available data, is worked out from the patient's history and examination. The next step is to determine a therapeutic aim (e.g. devising means for the patient to express aggressive feelings), and this is carried out by nurses and therapists, apparently with the help of an artificially produced environmental situation. Contact fostered in this way may become stable enough to warrant an analytic technique modified to fit the patient. The analyst must not be impersonal but must approach the patient on his own ground, as by using grunts to answer the patient's grunts. In this way the patient's ego is built up sufficiently to grasp the relationship between himself and the analyst. If after a period there seems to be no change, shock treatment is considered, but the other measures are continued.

W. Hewitt Gillespie.

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M. Ralph Kaufman. 'Psychoanalysis in Late-Life Depressions.' Psychoanalytic Quarterly, 1937, Vol. VI, pp. 308-335.

After discussing the inherent difficulties and discouragements of analysis of the psychoses and the more favourable findings of recent work, two cases are described, one in the fifth, the other in the sixth decade, both classified clinically in the manic-depressive group. Emphasis is placed upon the difficult problem of obtaining a significant transference relationship. The two analyses were therapeutically successful.

Lucile Dooley.

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Max Levy-Suhl. 'Resolution by Psychoanalysis of Motor Disturbances in an Adolescent.' Psychoanalytic Quarterly, 1937, Vol. VI, pp. 336-345.

A youth of sixteen, who had had motor disturbances since the age of three, attributed to organic brain lesion, complicated by neurosis, was analysed with resolution of the symptoms. The relationship between an infantile repression of masturbation and the development of motor disturbances (muscular erotism) is demonstrated. The patient's dyskinetic symptoms present a variant of the four forms of the unconscious representation of the body as a phallus described by Bertram Lewin.

Lucile Dooley.

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# SEXUALITY

Carl Müller-Braunschweig. 'Die erste Objectbesetzung des Mädchens in ihrer Bedeutung für Penisneid und Weiblichkeit.' *Internationale Zeitschrift für Psychoanalyse*, 1936, Bd. XXII, SS. 137–176.

This investigation is based on the supposition that in the first year of life there is an early genitality prevalent together with a genital object-cathexis. This early genitality, as expressed in the masturbation of the nursing period, recedes into the background during the oral and anal-sadistic phases and comes to the fore again in the phallic phase.

It is emphasized that the object of this primary post-natal genitality is the same for both sexes, namely, the mother, and that therefore the boy has as his first genital object an object of the opposite sex, whilst the girl has an object of the same sex. The girl, therefore, has in her development to take a decisive step, namely, to turn away from the mother to the father. Therefore the line of development of the two sexes is different from the very beginning, and it is not justifiable to speak of an analogous development of boy and girl during the first phases of life. It is assumed that, although the attitude of the small girl is aggressive and clitoris masturbation is prevalent, there is primarily a libido-cathexis of the vagina, so that the genitality of the two sexes is differentiated from birth onwards.

The fact that the mother is so important during the pregenital phases in the first years of life has been acknowledged by psycho-analysis. But it has not been considered enough that there is an important difference between boys and girls in these phases, in so far as the relationship to the mother is a heterosexual one for the boy and a homosexual one for the girl. This fact is of extreme importance in its relationship to the penisenvy of the girl. The girl feels inferior to the boy not only on account of the anatomical difference, but because the primary relationship to the mother lacks the heterosexual tension and satisfaction. The penis-envy and the female inferiority feeling originate in this disappointment and not in the fact that the male genital can be seen and the female genital is hidden. The girl feels with her first specific genital excitations that the sexual relationship to the mother is insufficient and inadequate. Even without having seen the genital of the brother the girl perceives that the brother is the adequate partner for the mother. The male attitude of the little girl has to be considered as a reaction-formation and the lack of knowledge of the vagina is not a genuine phenomenon but the result of a very early defensive measure against vaginal sensations. It is assumed that the attraction between the opposite sexes is based on a somatic factor and cannot be explained psychologically. This theory of the primarily feminine genitality of the girl is very carefully examined in its relationship to further development.

K. Friedlander.

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Fritz Wittels. 'Mystery of Masochism.' Psychoanalytic Review, 1937, Vol. XXIV, No. 2, pp. 139-149.

The neurotic has at least two personalities, sometimes more. These war against each other and one tries to kill the other. Sometimes the one most in contact with reality tries to kill the other; e.g. a woman with syphilophobia is trying to kill her prostitute personality. Sometimes the dream personality tries to kill the one in reality as in cases of emotional deadness where a vivid phantasy life exists. The mystery of masochism is this that one personality has pleasure in the pain of the other.

Clara Thompson.

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Edith Jacobsohn. 'Beitrag zur Entwicklung des weiblichen Kindwunsches.' Internationale Zeitschrift für Psychoanalyse, 1936, Bd. XXII, 3, SS. 371-378.

In the analysis of a girl between the ages of three and five, given in detail, three stages could be observed in the development of the wish for a child. The first phase from the second to the third year shewed a narcissistic object-relationship to the mother, which is rather ambivalent owing to frustrations and anxiety, lest the mother should have more

children. Strong oral envy, identification with the child in the womb. Envy of the pregnancy of the mother, caused by the real observation of the new pregnancy of the mother, associated with envy of the breast of the mother. Impulses of oral-sadistic introjection of the mother and the child in the womb. Anal- and urethral rebirth-fantasies.

The second phase, from the third to the fourth year, contains the observation of the penis and the primal scene. The penis envy of the father is combined with the earlier oral-sadistic tendencies against the mother and leads to oral fantasies of stealing the penis. Enlightenment as to sex differences leads to the idea that the vagina is a 'lower mouth' and also to the illusion of having a penis. There is increased masturbation with bisexual fantasies. Receptive-genital impulses of stealing the penis of the father and at the same time phallic urethral and anal-sadistic fantasies towards the mother, with increased anxiety.

In the third phase (fourth to fifth year) after having been threatened in reality by the father, the 'being castrated' is experienced. Accusations against the mother as having seduced and castrated the girl and against the father as having seduced her to masturbation and castrated her. The wish for a child is revived along the lines: fæces-child—penis-child. The receptive-genital impulses to steal the penis of the father and the anal and urethral tendencies against the mother are transformed into genital œdipal impulses with the wish for a child.

It is emphasized that the development of this child follows the description of Freud in 'On Female Sexuality'. Special individual traits in the development of this child in respect to female castration-anxiety and masochism are described in detail.

K. Friedlander.

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Michael Bálint. 'A Contribution to Fetishism.' Internationale Zeitschrift für Psychoanalyse, 1937, Vol. XXIII, Part 3, p. 413.

The author gives two new interpretations to fetish. He points out that it is within range of the normal if one or the other quality of the love object becomes of great importance for the choice in love, but it is near the borderline when such a quality is regarded as an indispensable condition. Fetishist in the proper sense of the word can only be called 'who does not need a partner in sex, but a fetish, and whose sexual activity does not aim at the sexual act proper'. Fetishists are as a rule men. The activity giving satisfaction consists of putting the fetish on, or of putting a part of the body into the fetish. Many objects used as fetishes are hollow, such as shoes, corsets, or garments, etc. It is obvious that the fetish represents a vagina, or the body of the mother, while the used part of the body represents the penis. Fetishists are, thus, men who cannot practise coitus

but symbolically. A patient whom the author analysed readily admitted these displacements, but it was more difficult to demonstrate to him that the part of the body used in the fetishistic activity represented the father's penis.

Furthermore the fetish is always a valueless object. If it is a garment, it must be old, or at least have been worn. Another invariable quality of the fetish is that it is inanimate, and that it can easily be taken away from the person to whom it belongs. On the other hand, it is essential for his satisfaction that the fetishist can enjoy the undisputed possession of the object of love. All these elements point towards a second meaning of the fetish: fæces. The author is unable to say how the fetish obtained this significance, and whose fæces it represents. Probably it stands for the parents' fæces, and, thus, fetishism is connected with the anal theory of birth, and of sexual intercourse. The author agrees with Melanie Klein in the importance she attaches to the child's interest for the inside of the parental body, but he does not follow her in so far as he does not consider this interest primary. He assumes that the basis of these phantasies is the repressed maternal vagina.

Kleptomania and transvestism are probably connected with the same mechanisms. They differ in their accentuations. In kleptomania the accent lies on taking-possession, while transvestism is characterized by the urge to put things on. It is an advantage of a theory if it allows to link up these three perversions with each other, as they appear to be clinically related.

H. A. Thorner.

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## APPLIED

W. R. D. Fairbairn. 'Prolegomena to a Psychology of Art.' British Journal of Psychology, 1938, Vol. XXVIII, pp. 288-303.

Since the artist can create, theoretically at least, irrespective of any beholder, the psychological problems of art can only be approached with profit through the study of artistic activity. Artistic activity falls into the general class of activities undertaken for their inherent satisfaction, i.e. 'for fun'; but it is differentiated from other members of its class by the fact that it is not simply 'doing something for fun', but, more specifically, 'making something for fun'. Anything that is made for fun must accordingly be regarded as a work of art.

Although the work of art is distinguished from the dream by the fact that it is a product of motor activity in the waking state, the two phenomena have sufficient in common to justify us in regarding the 'creative phantasy' embodied in the work of art as analogous to the 'manifest content' of the dream. We must also postulate an unconscious process of

'art-work' (analogous to 'dream-work'), whereby the repressed urges of the artist are enabled to reach consciousness in the form of such creative phantasies. The artist's conscious manipulation of his creative phantasy, as he embodies it in an actual work of art, is in turn analogous to the dreamer's 'secondary elaboration' of his dream.

Recent psycho-analytical research has gone to shew that repression originates as a means of safeguarding the ego against the consequences of destructive id-impulses—impulses which, at the level of object-love, threaten the integrity of love-objects (thus occasioning guilt), and which, even at the narcissistic level, threaten the sources of libidinal satisfaction (thus occasioning anxiety). It follows that, since art provides a means of expression for the repressed urges of the artist, the destructive impulses must play an important part in artistic activity. In certain works of art the direct embodiment of destructive phantasies may be readily recognized. Nevertheless, the influence of the destructive impulses is usually exerted indirectly through the medium of compensatory phantasies of restitution, designed to provide some reassurance regarding the integrity of love-objects; and, since artistic activity is essentially creative, we must regard it as dominated by motives of restitution.

Further consideration reveals evidence of motives of restitution in the very nature of art-work itself. In the light of Freud's theory of mental structure, art-work is seen to be, not only a means whereby repressed phantasies are enabled to evade the censorship of the super-ego and so to be placed at the disposal of the ego for embodiment in works of art, but also a means whereby the ego is enabled to convert phantasies unacceptable to the super-ego into positive tributes to its authority. Art is thus seen to represent a creation of positive values in the service of an ideal. Within the sphere of morals the endopsychic tension created by the demands of the super-ego is experienced by the ego as 'the voice of conscience'; and it is accompanied by an urge to do something by way of restitution for destructive impulses harboured. Within the sphere of art the tension created by the demands of the super-ego is experienced as an itch to make something; and the creation of a work of art thus becomes a means of restitution analogous to the moral act.

It now becomes plain that the audience for which the artist creates consists in his own super-ego. Nevertheless, since the super-ego originates through the substitution of internal for external objects, we must envisage a primitive form of art, belonging to a level preceding that of super-ego formation, and representing simply a restitution to external objects (real or phantasied). The art of early childhood and of prehistoric times may well be of this nature.

Author's Abstract.

Juan Péon del Valle. 'Politica e Higiene Mental.' Revista Mexicana de Psiquiatría, Neurología y Medicina Legal, Mexico, D. F., 1937, Vol. IV, No. 20.

This paper advocates the application of mental hygiene to those who embark on a political career.

H. Mayor.

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Karl Abraham. 'Giovanni Segantini, a Psychoanalytic Essay.' (Translated by Dorothea Townshend Carew.) *Psychoanalytic Quarterly*, 1937, Vol. VI, pp. 453–512.

This is the first appearance in English of the complete text of the essay by Abraham which was published in German as Heft XI of Schriften zur angewandten Seelenkunde, Wien: Deutike, 1911. Basing his study chiefly on a biography by Franz Servaes, Abraham explains in the light of psychoanalytic concepts the psychological development, the inner and outer life, the art and the works of the artist Segantini. The dominance of the mother-son relationship is shewn in the psychic motivations of the life, as well as in the forms of the art, and in the themes of Segantini's paintings. To him earth, nature, and the Alpine landscape all represented his mother. The ambivalence of this relationship is shewn in his work, in his personality traits, his cycles of activity and depression and in the actions that brought about his early death. As one of the earliest attempts at psycho-analytic study of the artist, following Freud's study of Leonardo da Vinci, this essay deserves the attention of students of psycho-analysis.

Lucile Doolev.

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I. F. Grant Duff. 'A One-sided Sketch of Jonathan Swift.' Psycho-analytic Quarterly, 1937, Vol. VI, pp. 238-259.

Significant life experiences and important writings of Swift, discussed analytically, reveal pregenital fixations pre-eminent in his peculiar type of phantasy. The anal character of his misogyny, anal traits in the unconscious self portrait of Gulliver's Travels, the clarity with which he portrays the peculiar nature of his super-ego conflicts and the peculiar forms of insight into himself evinced in his writings all serve to emphasize the dominance of the pregenital fixations.

Lucile Doolev.

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Karl A. Menninger. 'Criminal Behaviour as a Form of Masked Self-Destructiveness.' Bulletin of Menninger Clinic, 1938, Vol. II, pp. 1-7.

This is a chapter from the author's book, Man Against Himself (Har-

court Brace & Co., February, 1938). The criminals who get caught are the neurotic criminals, and those of them who have been studied psychoanalytically shew the same general formula as for other methods of self-destruction. Brief reference is made to a manuscript written to a criminal in Kansas, whose wish to be executed was strong enough to overcome a long existing law and sentiment against capital punishment.

M. G. Evans.

# BOOK REVIEWS

Clinical Aspects of Psycho-Analysis. By René Laforgue. (Hogarth Press and Institute of Psycho-Analysis, London, 1938. Pp. 300. Price 15s. net.)

Although books, or, for that matter, papers on the technique of psychoanalysis are few and far between, they all exhibit certain features in common. In the first place they incline to be almost timidly conservative. Only the most generally accepted theories or principles of psycho-analysis are used as a framework for the exposition. To offset this timidity the author has usually some favoured theories or clinical approaches of his own, which he uses to amplify the more stereotyped systematizations. Finally they are without exception sample approaches. A book on technique combining breadth of approach with richness of clinical detail has yet to be written. Of all existing books on the subject it can be said that in accordance with the writer's sense of perspective or judgement the tendencies described above may constitute the main virtues of his work or its chief blemishes. Of Dr. Laforgue's book, which although called Clinical Aspects is essentially a book on technique, it may be said outright that it illustrates many of the advantages and a few of the drawbacks of the methods of approach indicated. And considering the backward state of the literature on this subject one cannot but be grateful for a contribution which combines a safe clinging to the traditional with a frequently refreshing individual point of view.

Dr. Laforgue is a good clinician, and the outstanding merit of his work, particularly for students of psycho-analysis, is the emphasis he lays on practical aspects of the therapeutic process. He pays close attention to the different clinical varieties of resistance and devotes several chapters to their study. He is also adept at singling out the 'Gain through illness,' paying attention to both primary and secondary varieties. Although it might appear that he is more interested in 'secondary' gain, this is all to the good. Students whose attention is too closely drawn to primary gains are apt to neglect the significance of secondary gain, as if it were somehow a sign of superficiality to analyse preconscious factors. This is a cardinal blunder. Moreover, the author is consistent in his application of policies. and throughout his book stresses the significance of family environmental influences, in particular the existence of 'family neuroses'. This soon brings him to grips with the problem of handling environmental situations. a problem leading directly to the question of 'active' therapy. He describes two varieties of technical modification. First, the modification of the association rule to cope with certain forms of resistance, and second. the use of technical devices of the 'Ferenczi' type, whereby the analyst takes a hand in the patient's external situations and makes positive

recommendations governing conduct. Dr. Laforgue definitely belongs to the group of analysts who are ready to employ this technique when necessary.

Another feature of his book is the way he singles out different disturbances of character and gives them a special label, e.g. he terms the 'carmelite neurosis' that tendency common in masochistic women of passively enduring and capitalizing a variety of traumatic experiences. French medical writers seem to have a genius for detailed classifications and for the isolation of clinical syndromes. Dr. Laforgue is no exception to the rule. And some tidying up in the field of psycho-analytic characterology is certainly overdue. For, although the classical symptomformations have been accurately divided, no attempt has been made to reduce to order the multitude of ego-disorders which take the form of social peculiarities. Unfortunately, the author does not go far enough in this direction and his formulations have the disadvantage of being unsystematized. In any case, descriptive labels have the disadvantage of giving no hint as to the depth of the disorder. The significance of frigidity, for example, a condition on which the author has a good deal of an illuminating nature to say, varies according to the depth of psychic disturbance, and can be accurately assessed only when other symptoms are present of a psycho-neurotic or psychotic type by which the level can be assessed. Terms such as 'carmelite neurosis' do not give any such indications. Nevertheless the attempt at classification is very praiseworthy and should be followed up by other writers.

As regards Dr. Laforgue's etiological formulations, it is fair to say that they are of the classical pattern. He writes in a vivid and refreshing way. Unfortunately a good deal of his style has been lost in translation, and there are a number of linguistic renderings which call for thorough emendation in any subsequent edition.

Edward Glover.

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The Psychology of Social Movements. By Pryns Hopkins. (George Allen and Unwin, London, 1938. Pp. 284. Price 10s. 6d. net.)

Mr. Pryns Hopkins' book is outstanding in a number of respects. In the first place he has a simple and ingratiating style of exposition, and, within the somewhat limited range he has purposely set himself, gives an unusually readable and persuasive account of a number of established psycho-analytical findings. Secondly, he is not only a convinced and enthusiastic follower of Freud, but a convinced and enthusiastic social reformer. And he makes no bones about it in this book, which is an attempt to combine an analysis of individual and social maladaptations with a justification of the principles of ethical hedonism. The latter he regards as the most suitable yardstick with which to measure, and, pre-

sumably, regulate the efforts of the reformers. Briefly stated, his ultimate panacea for all social and individual ills is psycho-analysis. Personal analysis should be made available for the greatest number possible; and in the meanwhile every effort should be made to broadcast those explanations of social behaviour that psycho-analysis is in a unique position to offer.

It is obvious that in following this plan the author has deliberately sacrificed some of the privileges of the empirical scientist in order to direct his reformist energies to the best advantage. And, of course, if his reformist ideas are right, he is doubly right in so doing. For this reason, the book stands or falls less on the accuracy of its analytical expositions and explanations than on the validity of its metaphysics. As far as its analytical aspects are concerned it may be said at once that these stand up very well to inspection. There is an overstress of the importance of phases of infantile erotism; or rather the emphasis laid on these elements prevents the author doing justice to the complicated nature of the ego systems prevailing during each phase. Occasionally as when he speaks of the super-ego being 'driven into' the unconscious he does less than justice to primitive forms of super-ego development.

Incidentally, it is to be noted that although the author is ready to apply analytical tests to a number of social manifestations, he does not apply them so faithfully to the motivations of social reformers. And this has unfortunate consequences. For although philosophically regarded his argument on ethical hedonism is sound enough, it overstresses one conscious aspect of mental reaction. From the point of view of total mental function the yardstick of quantitative happiness is inadequate. To take a simple instance: the alleviation of mental pain or anxiety is not necessarily followed by positive happiness, and even if a phase of elation ensues it does not follow that this is experienced in consciousness in the form of happiness. It might, for example, take the form of compulsive hyperactivity. Even when conscious happiness does follow relief from unconscious or conscious anxiety it is frequently a reaction to gratification of newly released energies of a kind differing from those causing the anxiety (i.e. love energies going out to new objects when some conflict over internal aggressivity has been overcome). The complicated relations of the pleasure-pain principle to the reality principle, of anxiety to guilt or depression (potential and actual), to say nothing of the difficulties introduced by fusion of different instincts (each of which has a characteristic affective tone), make it impossible to set up hedonistic vardsticks of the kind Mr. Hopkins favours. The mere fact of variation in clinical or characterological types sets the whole system in confusion. Just as freedom from anxiety is important to the hysteric and freedom from exaggerated guilt stimuli is essential for the tranquil type of obsessional

character, so the pursuit of happiness is the special preoccupation of types who labour with unconscious depressive reactions. Moreover, it is desirable that the yardstick for the reformer should not differ too unduly from the yardstick of the average citizen, otherwise the awkward situation might arise that the 'greatest happiness for the greatest number' would be dictated to that majority in accordance with the 'greatest happiness of (a minority of) social reformers'. Indeed, Mr. Pryns Hopkins sails very close to the wind when in the chapter on the 'tobacco habit' he gives a comparatively free rein to his personal reactions. Having described 'sensory naturalness' as one of the six main needs of mankind, satisfaction of which will promote the greatest happiness, he attacks 'tobacconism' with some gusto. But if, as he seems to indicate, the tobacco habit is spreading so rapidly, the time will no doubt come when Mr. Hopkins will find himself in the hedonist dock facing charges of sabotaging the happiness of the greatest number. In any case, the distinction between 'malignant' drug addictions and 'benign' drug addictions should be made on clinical grounds, not on grounds of ethical, economic or sensory efficiency. It is not good clinical policy to isolate one manifestation and without assessing its contribution to the total mental balance of the individual, make it a scapegoat for an apparent imbalance.

The main objection to Mr. Pryns Hopkins' yardstick lies in the lack of elasticity of the measure. It is certainly arguable that for many individuals a strict limitation of the range of their happiness-drives is most desirable. To borrow again from clinical observations: it is notorious that the range of interest of many hysterical types is limited to the immediate family circle or their more immediate substitutes. When they attempt to go without this circle their efforts are not only haphazard but frequently produce an effect opposite to that intended. Who, for example, is to assess the comparative value of one mother's friendly interest in her own baby and another's preoccupation with the fate of Czecho-Slovakia? And, incidentally, who is to assess the social efficiency of either system? Certainly not the professional psycho-analyst whose primary concern is with the clinical adequacy of the individual's adaptations.

Although these criticisms may appear to question the utility of Mr. Pryns Hopkins' approach it should be added that the author makes a gallant attempt to arrive at a specific analytical formula for each of the problems touched on. Very few writers on psycho-analytical sociology make any serious attempt to do so. Moreover, he is ready to admit his personal bias and in this way goes far to disarm criticism. His capacity for exposition makes one regret that he did not divide his energies more effectively. He has proved beyond doubt that he can write an attractive popular account of psycho-analytic findings, and that he is a good and challenging propagandist. He must not take it amiss if the simultaneous

application of these two capacities should get him into a certain amount of hot water.

Edward Glover.

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Personal Aggressiveness and War. By E. F. M. Durbin and John Bowlby. (Kegan Paul, Trench, Trubner & Co., London, 1939. Pp. 154. Price 5s. net.)

Mr. Durbin and Dr. Bowlby have had the good sense to publish as a separate book what was once merely an important section of a larger volume on War and Democracy. War and Democracy was quite frankly a tendentious volume. Written by a group of young Socialists and advertised by both authors and publishers as a political contribution, it fell into the same category as Mr. Pryns Hopkins' book (see review in this JOURNAL) and became subject to the same criticisms. Although the essays by other authors were not very violently political, they gave a reformist twist to a subject which is not yet ripe for such manipulations. Not that the present contributions of Mr. Durbin and Dr. Bowlby are entirely free from tendentiousness. For example, although they are aware that the manifestations of violence and of 'animistic' reactions in the Soviet Republics provide apt illustrations of their views, they devote very much more space to a critical examination of the behaviour of Hitler and Nazidom. Again, although their main object is to examine the relation of personal aggressiveness to war and peace and although they make many proper distinctions between the manifestations of peace and those of war, they have not refrained from ending their essay with the blunt statement 'Article XVI of the Covenant of the League of Nations was and is, in our view, the only hope for the peace of the world'. All that Article XVI of the Covenant does is to give research scholars a third problem to examine, viz. what is the significance (to say nothing of practical value) of certain social phantasies in which aggressiveness and peaceableness seem to be equally represented. Until such investigations have been carried out it is desirable for research students qua research students to hold their propagandist fire.

Some years ago the present reviewer drew up a scheme of research on the problem of war and stressed the necessity of collecting evidence through observation (psycho-analytical and otherwise) of the reactions of both civilized and uncivilized groups of all ages. Since then Professor Ginsberg has done some work on anthropological and general sociological aspects of the subject, but the present authors are the first to apply themselves to the task in a systematic way. The fruits of their labours are presented in a form of a large appendix to a short general essay on personal aggressiveness and war. Actually the appendix should have been made the main section of the book. It contains a collection of interpreted

observations on apes, infants and children, also on adults of both primitive and civilized groups. This part is well done and should be convincing to any intelligent reader. Naturally it is bound to be rather selective, because all the fields touched on require an immense amount of exploration, but it is a good beginning. The only comment that can be made is that the conclusions drawn from the evidence do not differ materially from the a priori conclusions drawn by earlier writers on psycho-analysis and sociology. It is probable that much fresh ground must be broken before any fresh formulations on war can be arrived at. And in any case research workers cannot be expected to take out much more than they put into any particular subject.

The general essay is, inevitably, not of the same quality as the appendix, but that is not altogether the authors' fault. They do not claim any special originality for their theories and have perforce taken up a good deal of space recapitulating unconscious factors leading to war which have already been put forward by a number of writers not only on war but on the more general relations of psycho-analysis to sociology. It would have given them more scope for originality if they had omitted all this or contented themselves with a summary of it. Incidentally the 'cell' theory of social structure is implicit in Freud's original work on the subject and has been advanced by the present reviewer on many occasions as a nodal point in war-research. Similarly with what the authors call the 'pluralistic theory ' of war causation. Psycho-analysis has always stressed the overdetermination of causal factors, and only in the very early days of clinical investigation was there any hope of attributing any one psycho-neurosis to any one main factor. In fact the pluralistic theory, although sound enough, is the bane of modern psycho-analysis: for it necessitates the isolation of a more or less specific combination of factors in each psychopathological state. And this has so far proved extremely difficult. Understanding of war crises or outbreaks cannot be achieved until the specific combination of predisposing, precipitating and unconscious factors is established. Just how difficult that task is can be gathered from some of the more controversial views held by the authors. For example although they do not believe that internal class conflict is certain to make a nation more war-prone, they regard the existence of anti-social minorities as being directly responsible. This argument is evidently based on resemblances between war and crime: it 'lets off' the alleged peaceable majority on the strength of a (pre)conscious assessment of good intentions. Indeed throughout the book the authors seem to be ready to exaggerate the significance of the forces of peaceful co-operation during peace. It may be that the number of peace hours is greater than the number of war hours—but such temporal measures are not measures of energy. Manufacturing a shell is a peaceful occupation, but the energy dissipated in

firing it is much greater although discharged in a shorter time. And in view of the diphasic nature of many individual pathological states (e.g. obsessional neurosis, drug addiction and abstinence, manic-depression, etc.) it is just asking for trouble to take a too rosy view of peace phases.

But these are, after all, legitimate differences of opinion calling for further investigation before final assessment. A more serious issue is raised by the title of the book, viz. Personal Aggressiveness and War. In the available space the authors certainly do justice to the factor of aggressiveness-accentuating its primary and secondary aspects and emphasizing the importance of ambivalence. But they do less than justice to the factor of sadism, a word which does not appear in the otherwise adequate index. But neither aggressiveness nor ambivalence is the same thing as sadism, although it is common enough amongst analysts to find these terms used loosely as equivalents. Although the authors do not neglect sexual factors, they seem to regard them mainly as agents which may either stimulate or counteract aggressiveness. But the study of suicide and of crimes of violence suggests that the specific factor of unconscious sadistic tension is one of the deeper precipitating causes of the outbreak. And there is much evidence to show that unconscious sadism can exert a more disruptive influence on ordinary sublimatory outlets than unconscious aggressiveness. It is interesting to note that differences of opinion on this subject reflect some of the confusion existing in psychoanalytical groups on the same issues. In recent years psycho-analytical writers have oscillated between the polarities of aggression and sexuality and at the moment seem to have landed themselves in the most confused forms of thinking on this subject.

It is to be hoped that Mr. Durbin and Dr. Bowlby will continue their researches. Indeed they might well consider enlisting the energies of a number of trained collaborators, for each section of the subject bristles with problems requiring specialized attention. The immediate necessity is more and more reports of the kind given in their appendix. The time for a statement of a priori convictions is past and there is no hurry to formulate fresh conclusions.

Edward Glover.

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La Musica nella Preistoria e nelle Antiche Civilta. By Mario Degani. (Libreria Nironi & Prandi, Reggio-Emilia, 1939. Pp. 121. Price Lire Six.)

Dr. Degani, a Museum Curator in Reggio-Emilia, has undertaken the task of collecting our earliest knowledge about music. Separate chapters are devoted to early Chinese, Indian, Egyptian, Mesopotamian, Semitic, Greek and Roman music.

In his introduction the author, who naturally traces the love of music

to vocal experiences, lays stress on the close association between the voice and dancing. In his opinion there were two emotional experiences above all others which evoked these manifestations, one the crescendo or orgiastic activities, the other the emotions of grief and remorse. On the basis of Freud's *Totem and Taboo* he combines these two emotional experiences in relation to the primal act of father-murder and subsequent remorse. One would congratulate the author on his remarkable perception.

E. J.

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New Horizons for the Family. By Una Bernard Sait. (The MacMillan Company, New York. Pp. 772. Price \$7.00.)

The author's purpose in this book is to contribute to a philosophy of the family, to assist through education in the preparation for marriage and family life, and to be of value in the training of teachers and social workers. It is based on the philosophical principles of John Dewey.

History and anthropology, sociology and economics, biology and psychology are searched for information into the realities of family life and for techniques for providing desirable changes. The use of 'Cooperative experimental intelligence in social affairs' is held out as an imperative need. 'The cooperative family' is the goal to be achieved. In this 'Manliness with its emphasis on protective strength, reliability and courage is the correlative of womanliness from which all traces of immature dependence has gone, but where the emphasis is still upon the qualities conducive to the care of life'.

Psycho-analysis comes in for considerable explicit discussion and is relied on implicitly to a far greater extent.

Dr. Sait quotes Dewey, 'Some psychoanalysts treat sex in a way which flagrantly exhibits both the consequences of artificial simplification and transformation of social results into psychic causes'. She criticizes further, 'In particular there has been neglect on the part of Freud and some of his followers of the cultural determination of sexual behavior'.

Malinowski, whose functional view of culture the author adopts, is noted 'to have shown the Œdipus complex to be a by-product, not a creative principle, but a maladjustment'.

Many of the points that Dr. Sait raises are the subjects of current re-examination and re-evaluation among psycho-analysts. In her advocacy of certain therapeutic procedures she shews, however, her failure to differentiate between psycho-analytical hypothesis and clinical fact. Thus she discusses the treatment of problems of marital maladjustment. 'Social psychology supplements the somewhat one-sided view of many psycho-analysts by stressing behavior as the product of social interaction'. 'Socioanalysis allows marital interaction to be interpreted in terms of the rôles of individuals—those patterns of coordinations of habits and atti-

tudes through which the individual maintains status in a particular group'.

In a short review no adequate picture can be given of the wide scope of this book. There are extensive bibliographies appended to each of its twenty-four chapters. Quotations and innumerable footnotes make it rather difficult reading.

Richard L. Frank.

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Philosophy and the Physicists. By L. Susan Stebbing. (Methuen & Co. Ltd., London, 1937. Pp. xvi + 295. Price 7s. 6d.)

According to Professor Broad, the nonsense written by philosophers on scientific matters is exceeded only by the nonsense written by scientists on philosophy.

Professor Stebbing's book is an attack on the popular work of Sir Arthur Eddington and Sir James Jeans as it appears in their many recent volumes; her material is, however, chiefly drawn from Eddington's The Nature of the Physical World and Jeans's The Mysterious Universe. This means that her contribution is largely negative; her single aim was to expose the superstructure of philosophy weakly built up on a highly doubtful interpretation of a single principle of physics the significance of which is still obscure—she had no intention of criticizing or attacking the immensely valuable scientific work of two illustrious physicists. Professor Stebbing's work is very thoroughly and competently done, so much so as to make one wish to know how Sir Arthur Eddington and Sir James Jeans respond to it. In spite of its merits, however, her book is unlikely to interest readers that have not read either Eddington or Jeans, since she makes so much direct reference to their views, and it would be difficult to appreciate her work apart from the writings that evoked it. Professor Stebbing writes clearly and her style in the present book is more flowing than in previous works. Her argument should be readily intelligible to the ordinary reader, except possibly when she writes in the medium of the modern logico-analytical philosophy—her exposition, for instance, of the Uncertainty Principle (pp. 180-181) is clearer than Eddington's (N. of P. W., pp. 220-221, 223-225).

The interest attaching to Professor Stebbing's themes is unequal and her treatment uneven. Thus one of her best chapters is the one entitled 'The Nineteenth Century Nightmare' in which she describes how the conception of Matter dominated and Determinism reigned; and her description of 'The Rejection of Physical Determinism' is equally good; but the chapter entitled 'Reactions and Consequences' is somewhat long and rambling, for the views of the various scientists are considered without being well marshalled or put to any use; and again in the chapter entitled 'Human Freedom and Responsibility' she makes a number of good

remarks, distinctions, and criticisms, without, however, integrating her subject-matter into a connected whole. In general the matter of the book could be put much more shortly.

Let us consider three possible types of reader that Eddington, Jeans, and Professor Stebbing may be supposed to have been writing for: (a) the philosopher, (b) the scientist (including students), and (c) the 'intelligent reader'.

- (a) There can be no doubt that Eddington and Jeans regard their philosophies seriously and intended them to be seriously considered in philosophic circles, but few philosophers, probably, would view their philosophizing in this light. At any rate, after the lapse of nearly ten years since Eddington published his chief work of this kind, there have appeared no works of criticism, commentary, or exposition, no books at all, on the work of Eddington and Jeans, till Professor Stebbing's. Philosophers will probably read Professor Stebbing's efforts to attack pseudophilosophy with considerable interest and sympathy.
- (b) The trained scientist might gain from Eddington's extraordinarily graphic illustrations a certain insight into physics, and a student would probably gain a good deal; but in spite of Eddington's genius for happy exposition, it is likely that what he says is intelligible only if one knows it already, i.e. has reached it by reading the mathematics of it. Moreover, a scientifically trained reader would be inclined to read these works in a special frame of mind, taking in the apt scientific illustrations with interest, and dismissing the rest as the sort of romancing that many people like to indulge in at times. With such a reader, the philosophic trappings that have roused Professor Stebbing to the point of print would fall away like water off a duck's back. Planck and Einstein have expressed themselves in no uncertain voice. Commenting on the widespread belief that the law of causality must be thrown overboard, Planck says: 'The fact that such an extraordinary opinion should be expressed in responsible quarters is widely taken to be significant of the all-round unreliability of human knowledge'. In a dialogue Einstein puts the matter thus: 'You must distinguish between the physicist and the littérateur when both professions are combined into one '. 'What I mean is that there are scientific writers in England who are illogical and romantic in their popular books, but in their scientific work they are acute logical reasoners'. Probably all scientists—in their scientific moments—would agree, and would read with gratitude Professor Stebbing's showing up of pseudo-philosophy.
- (c) There remains only the audience of the intelligent layman. On occasions when a difficult popular lecture has been delivered it is sometimes noticeable that the intelligent layman seems to have understood it with ease while specialists in the subject have found themselves extremely puzzled: the layman is lulled into thinking he has understood, and that he

has been duped is one of the things that Professor Stebbing finds distressing. Thus she writes (p. 18): 'The fundamental objection to the modes of expression so dear to both Eddington and Jeans is not merely that they are unilluminating; it is that such writing obfuscates the common reader whilst pretending to enlighten him. These writers encourage the reader to believe that he has understood a theory when he has only been entertained by an irrelevant illustration. They persuade him to accept the philosophical theory that is put forward because it has been preceded by a good deal of difficult and abstruse physics which the reader is prepared to accept as correct since it has been presented by a competent scientist who has, moreover, the air of explaining the inexplicable'. Professor Stebbing would apparently agree with the remark made above that this form of popular exposition conveys no information unless that information has already been acquired by mathematical means. As an example of the way in which Eddington's popular work misleads, Professor Stebbing cites Streeter's argument for the non-material or spiritual character of Matter. 'The burden of Canon Streeter's argument is that, since matter is composed of electrons and protons, and since electrons and protons have been shown not to be solid, it follows that matter is not solid. But to the popular mind matter seems more real than thoughts because matter seems solid. But now that we know that matter is not solid, even though it may seem so, we no longer have any reason for supposing that matter is more real than thoughts' (p. 272). She gives three admittedly insuperable objections to this view: (1) 'Unless the floor is solid, the word "solid" has no assignable meaning '(p. 273); (2) 'the discovery that atoms are "tenuous" was possible only because a piece of iron, for instance, is solid (p. 276); (3) '... to regard matter as tenuous—or to use an old-fashioned word "ethereal"—is in no way to diminish the difference between the material and mental' (p. 276). Professor Stebbing further comments (p. 285): 'It is odd to find that the view that "all is mysterious" is to be regarded as a sign of hope. The rejection of the "billiard-ball view" of matter does not warrant the leap to any form of Idealism'. This exemplifies the modern tendency for physicists to turn from materialism to Berkeley and idealism, a tendency for which Professor Stebbing gives two reasons (p. 266): 'There is first the change in the conception of matter; secondly, the change in the status assigned by many physicists to natural laws '.

Professor Stebbing's own book is primarily intended for the intelligent layman who has been duped by Eddington and Jeans; her book is to serve as a corrective. It is so difficult to know who the intelligent layman is and what kind of argument will affect him that, though on the whole Professor Stebbing is to be congratulated on the lucidity and force of her arguments, it may be doubted if she will achieve her main objective. In all

probability she could pen a successful reply only if she wrote in the vein of Eddington and Jeans, by skirting over difficulties and laying herself out to entertain. However just her logical analyses are, the intelligent layman will probably feel them to be carping, especially if, as is likely, he instinctively sides with Eddington and Jeans: in other words, these latter would be more successful than Professor Stebbing as politicians appealing to the emotions.

Of the general issues that gave rise to the philosophy of Eddington and Jeans probably the most important is Determinism. The conflict to which it leads is well illustrated by Professor Stebbing (pp. 220-221): 'Planck is anxious to refute indeterminacy in physics in order to save the dignity of man. Eddington is anxious to increase the amount of indeterminacy, recently introduced into physics, in order to safeguard our feeling of responsibility. Sir Herbert Samuel is afraid lest the denial of determinism should make man the sport of chance and lead to irresponsibility in action and increase of unreason in politics and life. Each of these three thinkers has reacted to the contemporary situation in physics in conformity with his own philosophy of life. That this is so is not in the least to be wondered at. Scientific theories may in part guide but cannot decide our philosophies. What is surprising, however, is that such diametrically opposed views as those of Planck and Eddington should be professedly derived from the development of physical theories, or that Eddington and Sir Herbert Samuel should each wish to defend human responsibility by denying what the other asserts and asserting what the other denies '.

Attacks on Determinism are probably due at bottom to the belief that this conception is incompatible with moral responsibility. The occasion of the attack in the realm of physics was the birth of Heisenberg's Uncertainty Principle whereby apparently electrons obey no law. The nonscientific interpretation of this principle consists in the admission of an indeterminacy in nature: that is to say, that a spirit, human or divine, can regulate natural events. If this is not so, it is felt, moral responsibility is without meaning: for if Determinism reigns, there can be no Freewill, and in the absence of Freewill man is exempt from responsibility for his actions in relation to his fellows. Determinism and Freewill have generally been used as contradictories, Determinism being used as a strong epithet to express the unbroken sway of cause and effect. Then the problem of Freewill is insoluble at the outset; the only way out of the impasse is either to reject Determinism or to give Freewill a satisfactory definition in terms of Determinism. The former is usually chosen because of the difficulty of achieving and understanding the latter. The nature of this difficulty may be described in the following way. We often find that Determinism is a synonym for Fatalism, the doctrine that man is blown

hither and thither as the wind listeth and cannot be a factor in regulating events. In this connection Professor Stebbing's comment is apt (pp. 242-243): 'The Fatalist says that my morrow is determined no matter how I struggle. This is a sheer mistake based upon a contradiction, which makes me the passive object; whereas I am the actor. The morrow is in part determined through my struggling. . . . We must not isolate my struggling from the predetermining causes and then put the results of my struggling into the determined effects'. Furthermore, Determinism is equated with Compulsion, in the sense that man may have to act against his desires, or his 'lower self' may master him. Such a connotation must indeed render it difficult to base Freewill on Determinism. Turning now to Freewill, we find that it is often used as equivalent to a non-natural or spiritual power over (let us avoid the word 'cause') physical objects, including man's 'lower self'. Such a conception is incompatible with Determinism in the world of physical objects, leaves man free to avoid sin, and allows him to be a responsible person.

Now a description of Freedom from a psychological angle must be such as to give an account of (a) choice and (b) responsibility. This will avoid the contradiction just described if it is given in terms of Determinism in its bare scientific sense without the adjuncts of Fatalism and Compulsion just mentioned.

- (a) The possibility of choice arises either when there is delay and inability to make up one's mind and choose, some inhibiting factor being present, or when on reflection there occurs the thought: 'I could take (or could have taken) the other alternative had I chosen'—here one is not whole-heartedly with the actual choice made, and there are either conflicting desires or conflicting feelings of duty, guilt, or responsibility.
- (b) Responsibility implies independence of authority. Such responsibility, which can be willingly undertaken with full recognition of its nature, is not to be confounded with responsibility that acts as a heavy load, wherein the independence of authority is incomplete and attended by a need for punishment for the wish to be independent. In the full sense, to say that a man is a responsible person is to say that from motives of friendliness rather than fear he shows consideration for the feelings and wishes of others.

Now responsibility of this order involves a balanced distribution of psychical forces, whereas the man that finds responsibility weigh heavily on his shoulders is a victim of maladjusted impulses. In a very real sense one is free and the other is not—but both may behave as a result of their psychical nature in a completely determined way. It is clear that, with developed responsibility, a man could not live in fear of being compelled to act against his wishes or of being unable to control his 'lower self'. Accordingly this account of responsibility and Freedom would not be

open to the two objections against Determinism that were mentioned above. It would seem, therefore, that Determinism is opposed, partly at any rate, because its opponents find difficulty in appreciating Freedom based upon it.

Professor Stebbing's contribution to this aspect of the subject is very meagre. She stresses a sense of 'responsible' that is scarcely relevant, namely, that a person is responsible for an event in the sort of way in which a hard frost is responsible for bursting water pipes—merely a factor in a total causal situation. Whether she adheres to this meaning when she distinguishes between being responsible to someone and being responsible for something is not clear. It is possible that she passes unawares from the conception of being causally responsible to that of being morally responsible. She remarks that (p. 225) 'Probably no one would dispute that responsibility for is more fundamental than responsibility to. But it seems to me that in the prolonged controversy concerning free will the main interest has been in the attempt to justify our responsibility to, or to deny it, rather than to consider the logically independent question concerning the meaning of "responsible for". It is the latter that is important; it is the former that has been prominent in the controversy concerning free will.' Clearly if she is thinking of causal responsibility she is correct; but then the remark is scarcely relevant to Freedom. If she is considering moral responsibility I would urge that the instinct of the protagonists was sound and that responsibility to is fundamental. Thus when a person experiences a burden of responsibility—and psycho-analysis will always reveal that this involves fear of some person-he will often fasten the feeling of responsibility for to all sorts of things, many of them having no claim to the position of being responsibilities: the guilty mind does not first have a responsibility and then seek for someone to whom to be responsible, but first feels responsible to someone and then seeks something-almost desperately—to be responsible for.

Professor Stebbing's conclusion on the present theme is astonishing in its singular lack of contribution to the subject (p. 249): 'Human freedom consists in this: that we do not yet know what we shall be, not because the knowledge is too difficult to acquire, not because there are no certainties but only very great improbabilities, but because we are not yet finished. We are begun; what we have already become and are now becoming plays a part in what we shall become. Nothing could be a more inadequate image for a human being than a pot or a machine, unless it be a hazy collection of qualities accidentally collocated and labelled with a name'. But it would be unfair not to say that for vagueness this passage in her book is unique.

If we agree that Determinism neither implies the impossibility of

executing wishes nor renders moral responsibility meaningless, we are in a position to approach it to see if it objectively has a place in science. First of all, however, we have to enquire whether in any sense science has been based on Determinism. Raising this question, Professor Stebbing writes (pp. 191-192): 'We have already seen that scientists have certainly believed that science was based upon determinism. Moreover, were that not the case there would have been no occasion for rejoicing or mourning, nor could we have spoken of "the decline of determinism". Indeed, Eddington insists that "the withdrawal of physical science from an attitude it had adopted consistently for more than 200 years is not to be treated lightly ". . . . But to say that science is based upon determinism is to say that scientists have based their work upon determinism. There is no science apart from the minds of men. Accordingly, we can say loosely that science is based upon determinism, provided that the procedure of scientists has been deterministic and that no alternative to this procedure can be consistently carried through. But, if it be true that "so far as we have yet gone in our probing of the material universe, we find no evidence in favour of determinism", it must be concluded that the work of earlier scientists has been based upon an illusion. This is, indeed, what Eddington wishes to maintain. I think that there is a sense in which it is true, but to describe the acceptance of determinism as the acceptance of an illusion is, I believe, more misleading than helpful'. It is however doubtful if this question is so important as Professor Stebbing suggests. If Determinism is a pattern-making concept, science is based on Determinism if it conforms to this pattern and Determinism is true of the universe so far as science is true of it (i.e. in the sense in which science is true); but it does not follow that there could be no form of science constructed otherwise than according to the deterministic pattern. It is, however, quite certain that we have not so far met with such a form of science; and it is quite probable that we are not humanly capable of conceiving an alternative pattern.

The fears that are stimulated by Determinism in so abstract a field as physics are likely to be intensified in the field of psycho-analysis, when it is recognized that behaviour is after all the plaything of unconscious forces or the 'lower self'. Consequently to attack Determinism is all the more necessary as a means of attacking psycho-analysis, and conversely to attack psycho-analysis can be to attack Determinism in its most important sphere. The most obvious argument to use in this connection against psycho-analysis is that if physics has had to relinquish Determinism, psycho-analysis may have to do the same. Physics, however, has not suffered through the loss—if indeed the loss has been incurred—and there is no reason to suppose that psycho-analysis would suffer any more than physics. In any case such indeterminism as is asserted for physics refers

to electrons, which are scientific constructions and are microscopic and unobservable entities; there could be no ground for denying Determinism of the mind on the basis of an analogy in physics wherein Determinism was denied of the microscopic and unobservable.

As to the concept of *causation*, which seems fundamental and essential for all practical purposes, it may become possible to analyse it into more primitive psychological elements. But that would not imply that causation was entirely a projection into nature of this aspect of our minds: even if it is not subjectively an ultimate, that is no reason for supposing it may not be true of nature.

Let us pass now from arguments against Determinism that are based on ulterior considerations, and concentrate on its objective relevance to science. The problem may be investigated under two headings: (1) alternatives to Determinism; and (2) rationality.

- (r) The only alternative to Determinism that would permit of scientific prediction would be some concept of Orderliness or Uniformity; but, be it noted, this if it is to differ from Determinism would have to be of a factual kind, and it would remain a mystery why the universe should have, and continue to have, an orderly character. Perhaps some scientists that oppose Determinism on objective or scientific grounds, apart from ulterior considerations such as moral responsibility, do so because to them Determinism means that particles of matter are endowed with animistic influences that have the power of initiating motion. Such a conception would of course be as indeterminist as any form of indeterminism. But there is no need to interpret Determinism in this way, for it may be possible, without infusing material particles with animistic life-charges, to ascertain what exists in Determinism over and above orderliness: we may say that Determinism is orderliness maintained by physical necessity, which it is not too much to hope might be experimentally investigated.
- (2) Science is rational: we have no rational knowledge that is not scientific. Now it is difficult to conceive of a non-deterministic explanation that could be rational, for there would always be an unanswerable question left over, namely, what feature is there of matter that renders its behaviour orderly. Thus rationality demands both Determinism and science: Science is rational; what is rational is deterministic; therefore science is deterministic. As Russell puts it: 'Determinism, whether universally true or not, is coextensive with the sphere of possible scientific knowledge; where it fails, scientific knowledge fails'.

J. O. Wisdom.

# BULLETIN OF THE INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION

EDITED BY

EDWARD GLOVER, GENERAL SECRETARY

# REPORT OF THE INTERNATIONAL TRAINING COMMISSION

Edited by EDWARD BIBRING, Secretary of the I.T.C.

I. REPORT UPON THE PLENARY SESSION OF THE I.T.C. AT THE FIFTEENTH INTERNATIONAL PSYCHO-ANALY-TICAL CONGRESS IN PARIS

The Plenary Session of the I.T.C. was held in the afternoon of July 30, 1938.

In his opening remarks the Chairman, Dr. Eitingon, referred to the severe loss suffered by the I.T.C. owing to the dissolution of the Vienna Society. After the disruption of the Berlin organization, it had been hoped to build up a still stronger Training Institute in Vienna. These hopes had been shattered by the turn of events in Austria. Dr. Eitingon also referred to the absence of official representatives of American training organizations: this was in accordance with a resolution of the American Psycho-Analytic Association.

After some discussion it was resolved to leave the adjustment of relations between the American Psycho-Analytic Association and the I.T.C. in the hands of the Committee or of the Business Meeting of the International Psycho-Analytical Association.

Reports were then presented by the representatives of the various Institutes: namely, Budapest, Holland, London, Oslo, Palestine, Paris, Rome, Stockholm, Switzerland and Vienna.

Dr. Eitingon next replied to a number of questions in connection with the Institutes in Austria and Germany which had been dissolved as a result of political events.

Dr. Wilhelm Hoffer next presented a report upon the instructional course for teachers at the Training Institute of the Vienna Psycho-Analytical Society. He explained that this Course of Training had been started in 1933 with the idea that those who proved to be specially well qualified should proceed to be analysed themselves and should then be combined, together with similar persons who had already been analysed, into a permanent Teachers' Group; this would then undertake the training and general organization of analytical educationists. The statistics of membership of the courses carried through up to March 1938, as well as the activities of the study groups formed as part of the scheme,

REPORTS

shewed that it was filling a need felt by the teaching profession. The courses were attended by some 180 teachers, and when the Institute was dissolved the number of analysed teachers had reached more than forty. A third of the participants were from abroad.

Dr. Edward Bibring then gave a short account of attempts that had been made, particularly in Switzerland and Germany, to combine the various schools of psycho-therapy or to discover a common basis for them. He spoke also of currents within the psycho-analytic movement in the United States.

Finally, Miss Anna Freud discussed the difficulties and advantages of what have been described as 'after-analyses'.

### II. REPORT UPON TRAINING ACTIVITIES

As a result of political developments, we have to record the disappearance of three Institutes during the course of the last year: the Institutes in Vienna, Berlin and Rome were successively dissolved. As a consequence, the Prague Study Group, which was attached to the Vienna Institute, was also dissolved. On the other hand, the Indian Psycho-Analytical Society reports a gratifying advance. Owing to a benefaction, it has been able to found a Hospital, a Clinic and an Institute (which had previously existed only in a loosely organized form), and is now in a position to carry out training more satisfactorily. In the United States, the Study Group at Topeka, Kansas, which has hitherto been attached to the Chicago Society, has become an independent Society with an Institute of its own. The Los Angeles Study Group, which has also hitherto been attached to the Chicago Society, is now attached instead to the Topeka Society. In Europe, the coalescence of the two Dutch Societies has regularized and improved conditions for training in the Netherlands. The Danish-Norwegian Society has regained its unity, though its training activities are somewhat hampered by government regulations.

#### A. TRAINING INSTITUTES

Reports of the Training Organizations Recognized by the American Psychoanalytic Association

### BOSTON PSYCHOANALYTIC INSTITUTE

Technical Seminars: Dr. Helene Deutsch.—Theoretical Basis of Psychoanalysis: Dr. Robert Wælder.—Theory of Libido: Dr. Hanns Sachs.—Cultural Applications of Psychoanalysis: Dr. Isador H. Coriat.—Historical Survey of Medical Psychiatry: Dr. Gregory Zilboorg.—Introduction to Psychoanalysis: Dr. Ives Hendrick.—Seminar on the Application of Psychoanalysis to Pedagogy: Drs. William G. Barrett, Florence Clothier and Jenny Wælder.—Seminar for Social Workers: Drs. Helene Deutsch, M. Ralph Kaufman and John M. Murray.—Child Analysis: Mrs. Beata Rank.

Educational Committee: Dr. John M. Murray, Dr. Isador H. Coriat, Dr. Helene Deutsch, Dr. William G. Barrett, Dr. Martin W. Peck, Dr. Hanns Sachs, Dr. M. Ralph Kaufman (Chairman).

John M. Murray.

## CHICAGO INSTITUTE FOR PSYCHOANALYSIS Lectures and Seminars

(1) For Members and Candidates:

Dr. Franz Alexander and Dr. Thomas M. French: Clinical Conferences. —Dr. Thomas M. French and Dr. Leon J. Saul: Seminar on Review of Psychaoanalytic Literature.—Dr. Thomas M. French: Psychoanalytic Theory of Instincts.—Dr. Therese Benedek: Seminar on Dream Interpretation.—Dr. Franz Alexander: Special Problems of the Psychoanalytic Technique.—Dr. Thomas M. French: Seminar on Freud's Writings.—Dr. Margaret Gerard and Miss Helen Ross: Child Analysis.—Dr. Helen Vincent McLean: Seminar on Wit and Humour.

(2) For Professional Groups and Candidates:

Dr. Franz Alexander: Introductory Lectures on Psychoanalysis.—Dr. Leon J. Saul: Review of Psychoanalytic Writings on Sociological Subjects.—Dr. George J. Mohr: Applications of Psychoanalysis in Education.—Mr. W. Lloyd Warner, Associate Professor of Anthropology and Sociology, University of Chicago: The Social Anthropology of Modern and Primitive Societies.—Dr. Franz Alexander and Dr. Thomas M. French: Seminar on the Application of Psychoanalysis to Cases of Psychoses.

During the past year five candidates of the Institute completed their training analyses and three began their training analyses; six are in analysis at present. Twelve candidates are conducting analyses under supervision.

George J. Mohr.

# New York Psychoanalytic Institute Professional School

Theoretical Instruction. Dr. Sandor Rado: Psychopathology of the Neuroses and Psychoses.—Dr. David M. Levy: Experimental Aspects of Child Psychology (Seminar).—Dr. David M. Levy: Case Seminar on Medical Child Analysis.—Dr. Lawrence S. Kubie: Freud's Case Histories (Seminar).—Dr. Karen Horney: On Narcissistic Phenomena.—Dr. Abraham Kardiner: Dynamic Sociology (Seminar).

Clinical Conferences. Dr. Sandor Rado, Dr. Sandor Lorand, and Dr. Karen Horney.

Extension School

Courses of Seminars:

(I) The Application of Psychoanalysis to Social Work (Advanced Social Workers Seminar): Dr. I. T. Broadwin.

(2) Psychoanalytic Approach to Practical Problems of General Medicine (Physicians' Seminar): Drs. C. Binger, George E. Daniels, H. Flanders Dunbar, Leland E. Hinsie, Abraham Kardiner, Philip R. Lehrman, Sandor Lorand, Max D. Mayer, Clarence P. Oberndorf, Theodore P. Wolfe.

Educational Committee; Ex-officio: Dr. George E. Daniels, Dr. Bertram D. Lewin, Dr. Monroe A. Meyer, Dr. Sandor Rado. Elected: Dr. Adolph Stern (Chairman), Dr. David Levy, Dr. Sandor Lorand.

George E. Daniels.

### WASHINGTON-BALTIMORE PSYCHOANALYTIC SOCIETY

Educational Committee: Dr. Lucile Dooley, Dr. Lewis B. Hill (Chairman), Dr. Joseph O. Chassell, Dr. Frieda Fromm-Reichmann, Dr. Ernest E. Hadley.

Clinical conferences were held for thirty weeks in Rockville, Dr. Frieda Fromm-Reichmann (Chairman); and in Baltimore, Drs. Lewis B. Hill and Joseph Chassell (Chairmen).

Courses. The Literature of Psychoanalysis: Drs. Dooley and Silverberg.—Patterns in Patient-Physician Relationship: Drs. Sullivan and Hadley.

Student Body. Fourteen students were registered with the Society during the year. Of these, four became members of the Society upon completion of their work.

### BRITISH PSYCHO-ANALYTICAL SOCIETY

June 30, 1938. Candidates in active adult training 15; Waiting analysis for adult training, 7; In child training 3 (one of whom is also on the adult list). During the year Mr. Mohun resigned. Drs. Bowlby, Debenham, Macdonald and Rosenberg were passed for adult practice. Three candidates were advanced to do controls, making a total of nine candidates doing controls, two of whom were also doing child control cases. Ten new candidates were accepted, of whom four have commenced training. One candidate already passed for adult practice was added to the child list. There are now six candidates doing controls, three of whom are doing child control cases.

During the year three courses of lectures were given: Freud's General Conceptions of the Mind: Mr. Strachey.—Psycho-Neuroses: Dr. Payne.—Sexuality: Dr. Friedlænder.

Theoretical Seminars (monthly): Mr. Strachey, Dr. Foulkes (Freud). Child Seminars: Miss Sheeham-Dare, Mrs. Isaacs.

Training Committee: Drs. Jones, Glover, Payne, Rickman, Miss Anna Freud, Mrs. M. Klein, Miss Sharpe.

Edward Glover.

### INDIAN PSYCHO-ANALYTICAL INSTITUTE

During the year under review the number of candidates in training was five, of whom two were engaged in control analysis.

Theoretical lectures on psycho-analysis and psychiatry were given weekly by Dr. G. Bose, Dr. B. C. Ghosh and Mr. H. P. Maiti. Clinical seminars were conducted by Dr. G. Bose twice a week.

Training Committee: Dr. G. Bose (President), Mr. M. N. Banerji (Secretary), Lt.-Col. Owen Berkeley-Hill, Mr. H. P. Maiti, Dr. S. C. Mitra, Mr. G. Pal.

G. Bose.

### DUTCH PSYCHO-ANALYTICAL SOCIETY

As a result of the unification of the analytical groups in Holland we have been able to put in force a single scheme for the training of candidates.

A weekly technical seminar and a fortnightly theoretical seminar for beginners are held in Amsterdam. A seminar for child analysis is held fortnightly in Amsterdam and The Hague alternately. In addition, a fortnightly seminar for teachers is held at The Hague at which difficult cases arising in practice are discussed. Theoretical courses for teachers are also held in Amsterdam and Leyden.

Training Committee: Dr. S. de Monchy (Chairman), Dr. K. Landauer and Dr. M. Katan (Secretary).

The number of candidates is nine, of whom seven are medical and two laymen.

### DANISH-NORWEGIAN PSYCHO-ANALYTICAL SOCIETY

Training Committee: Professor Schjelderup (Chairman), Dr. Braatøi, Hj. Christensen (Secretary).

The number of candidates is four, of whom one is a physician, one a medical student and two are psychologists.

After a public discussion upon psycho-analysis, which was in part of a very violent character, the following Royal Decree was promulgated, which may affect, among other things, the training of candidates:

- (I) Physicians may not make use of psycho-analytic methods of investigation or treatment in the course of their medical activities without having obtained a special authorization for that purpose from the Social Department.
- (2) No one who undertakes the treatment of a patient and who is not a Norwegian physician, may make use of psycho-analytic methods of investigation or treatment unless he has obtained permission from the King for that purpose, in accordance with Section r (2) of the Law governing the rights and duties of physicians.
- (3) Any investigation or treatment is to be regarded as psycho-analytic which is continued regularly over a considerable period of time and which

REPORTS

is directed towards uncovering, interpreting or in any other way affecting unconscious mental contents.

In case of doubt it rests with the Director of Medicine to decide whether an investigation or treatment is to be regarded as psycho-analytic, after the Faculty of Medicine has pronounced its views on the question.

No authorizations have hitherto been issued.

Hjördis Christensen.

### HUNGARIAN PSYCHO-ANALYTICAL SOCIETY

Number of Candidates: At date of last Report, 22. New: 1. Training completed: 6. Training temporarily interrupted: 1. Actually in training: 17.

Training Committee: Dr. E. Almásy, Dr. I. Hermann, Dr. I. Hollós, Mrs. Vilma Kovács, Mrs. Kata Lévy, Dr. S. Pfeifer, Dr. L. Révész.

Lectures: Alice Bálint: Psycho-analysis and Education. L. Kertész-Rotter and others: Introductory Lectures for Child Specialists. (L. Rotter: The Child Specialist and Mental Phenomena; Evolution of the Mind.—E. Petö: Infancy.—M. Dubovitz: The Neuroses of Childhood.—K. Rotter: Puberty.)

Courses, Seminars and Study Groups. Alice Bálint: Technical Seminar.—M. Dubovitz: Seminar for Child Analysts.—I. Hermann: Obsessional Neurosis; Freud's Case Histories.—V. Kovács: Technical Seminar.—M. Bálint: Ferenczi's Technical Works.—K. Lévy: The Psycho-Sexuality of Women.—E. Gyömröi: Seminar for Mothers and Teachers.—Educational Study Group. (K. Gerö-Lázár and A. Bálint: Educational Seminar for Beginners.—K. Gerö-Lázár and K. Lévy: Advanced Educational Seminar.—K. Lévy: Introduction to Psycho-Analysis for Teachers.)

S. Pfeifer.

### PALESTINE PSYCHO-ANALYTICAL SOCIETY

With the assistance of my three colleagues, Dr. Brandt, Dr. Dreyfuss and Dr. Gumbel, we have had a regular therapeutic Seminar, in which we have discussed every problem of technique, for the most part in connection with clinical material. We have been appointed permanent advisors to the Jugendalijah. Dr. Brandt has also been made advisor to a large number of kindergartens.

M. Eitingon.

### PARIS INSTITUTE OF PSYCHO-ANALYSIS

Training Committee: Mmes. Marie Bonaparte and Morgenstern; MM. Odier, Leuba, Nacht and Schiff.

Number of Candidates: 14 (7 medical and 7 lay).

Courses: R. de Saussure: Introduction to Psycho-Analysis.—R. Allendy: Interpretation of Dreams.—J. Leuba: Biopsychology of the Instincts.—C. Odier: Place of Psycho-Analysis in Modern Psychology.—

A. Borel: Psychiatry and Psycho-Analysis.—R. Spitz: Defensive Mechanisms of the Ego.—S. Nacht: Sexual Difficulties.—M. Bonaparte: Theory of Instincts.—R. Laforgue: Phobias.—M. Cenac: Hysteria.—G. Parcheminey: Obsessions.—P. Schiff: Criminology.—J. Leuba: Family Neuroses.—R. Loewenstein: Psycho-Analytic Technique.—Mme. Morgenstern: Structure of the Personality and its Deviations.—R. Laforgue: Psycho-Analytic Clinic.

Lectures. D. Lagache: Mourning, Melancholia, and Mania.—T. Chentrier: Psycho-Analysis and Education.—R. Dalbiez: Psycho-Analysis and Reconstructive Reasoning.—O. Codet: Parental Problem in Child Analysis.

Marie Bonaparte.

### VIENNA PSYCHO-ANALYTICAL TRAINING INSTITUTE

As a result of political events the Vienna Training Institute has been obliged to abandon its activities. The courses and seminars for the Summer Term of 1938 had already partly begun. In the Winter Term 1937–38 the following courses of lectures, etc., were held.

### (I) For Candidates

Lecture Courses. O. Isakower: Theory of Instincts.—R. Sterba: Theory of Dreams.—H. Hartmann: Ego Psychology.—O. Fenichel (Visitor): General Theory of the Neuroses.—E. Hitschmann: Specialized Study of the Neuroses.—J. Lampl-de Groot: Problems of Technique.

Seminars. E. Bibring and P. Federn: Studies of Freud's Writings.—A. Freud: Child Analysis.—G. Bibring-Lehrer: Control of Analyses in Groups.

Lectures. P. Federn: Cathectic Processes in the Ego.—M. Steiner: Dream Symbolism of the Analytic Situation.

Study Groups. P. Federn and E. Stengel: Psycho-Analysis of the Psychoses.—H. Hartmann and W. Hoffer: Studies of Freud's Writings.—E. Bibring, H. Hartmann, W. Hoffer, E. Kris, and R. Wælder: Scientific Study Group.

Discussions. A. Aichhorn: Analyses of Delinquents.—B. Bornstein: Child Analysis.—O. Fenichel: Fundamental Concepts of Psycho-Analytical Theory.—E. Kris: On Dreams.—E. Sterba: Puberty Analysis.—R. Sterba: Therapeutic Theory.—J. Wælder: Typical Analytical Situations.

### (2) For Teachers

Lecture Courses. A. Aichhorn: Introduction to Child Guidance.—G. Bibring: Anxiety in Children.—D. T. Burlingham: Limits of Psycho-Analytic Pedagogy.—E. Buxbaum: Instructional Problems.—W. Hoffer: Education, Play and Teaching.—E. Sterba: Typical Troubles of Childhood.—R. Sterba: Psycho-Analytical Psychology.

Seminars. A. Aichhorn: For Workers in Child Guidance Clinics.—

G. Bibring, B. Bornstein, H. Hoffer, W. Hoffer, M. Kris, J. Lampl-de Groot, and R. Sterba: Studies of Freud's Writings.

Study Groups. B. Bornstein, D. Burlingham, E. Buxbaum, W. Hoffer, and E. Sterba: Psychology of Childhood and Puberty.—Conducted by A. Freud: Discussions in Common between the Study Groups.

At the time of the interruption of the Institute's activities there were thirty-eight candidates in training. Of these about ten were receiving training in theory only.

The Training Committee comprised the following: Anna Freud (Chairman), A. Aichhorn, E. Bibring (Secretary), G. Bibring, P. Federn, E. Hitschmann, W. Hoffer.

E. Bibring.

### B. TRAINING CENTRES

SWEDISH-FINNISH PSYCHO-ANALYTICAL SOCIETY

During 1938 no especial arrangements were undertaken, since there were only two candidates at the Training Centre.

As regards lay analysts and foreigners great difficulties have been raised in official quarters.

Alfhild Tamm.

#### C. STUDY GROUPS

PSYCHO-ANALYTICAL STUDY GROUP IN CZECHOSLOVAKIA

Events in Central Europe brought to an end not only the Vienna Psycho-Analytical Society but also our Study Group which was attached to it.

At the beginning of 1938 the number of training candidates was eight (four medical, four lay); and, of these, six were already carrying out practical work under control. During the first months of 1938, three candidates completed their training, while a fourth withdrew his candidature. There thus remained four candidates, who hope to complete their training abroad.

In the first four months of the year the following Seminars and Study Groups were held:—

Steff Bornstein, O. Fenichel and A. Reich: Case Histories.—S. Bornstein, O. Fenichel and A. Reich: Genesis and Treatment of Forms of Defence in Relation to Case Histories. (This Study Group was undoubtedly the most interesting work carried out in Prague.)—S. Bornstein: Problems of Child Analysis and Teaching.—O. Fenichel: Freud Seminar (Three Contributions and related papers).—A. Reich: Problems of Ego Psychology.

O. Fenichel.

### PSYCHO-ANALYTIC STUDY GROUP OF LOS ANGELES

Until June 1, 1938, the Chicago Psychoanalytic Society was responsible for training activities in California. Since the establishment of the Topeka

Psychoanalytic Society, the responsibility has been passed over to the new body. As a member of the Training Committee of the Topeka Psychoanalytic Society I represent the interests of psycho-analytic training in California.

In 1938 five physicians were in training analysis in Los Angeles and four in San Francisco.

The following Seminars were held in Los Angeles

Dr. David Brunswick and Dr. Ernst Simmel: Structure and Dynamics of the Personality.—Mrs. Frances Deri: Freud's Metapsychology.—Mrs. Deri: Theory of Dreams.—Dr. Simmel: Discussion of Older and More Recent Psycho-Analytical Literature. (This seminar was taken over by Dr. O. Fenichel in June, 1938.)—Dr. O. Fenichel: Theoretical Seminar.—Mrs. Deri, Dr. Fenichel and Dr. Simmel: Psycho-Analytical Technique.—Dr. Simmel: Seminar for Social Workers.

In the Spring of 1938, at the invitation of the University College of the University of Southern California, Dr. Simmel gave a series of six lectures, on 'The Fundamental Principles of Psycho-Analysis'.

Ernst Simmel.

### THE PSYCHOANALYTIC STUDY GROUP OF TOPEKA

The Topeka Society was admitted in June, 1938. Prior to that time it had the status of a Psychoanalytic Study Group, whose members were members of the Chicago Psychoanalytic Society. The Study Group conducted the following courses (January–June, 1938): Dr. Karl Menninger: Case Seminar (Group Control).—Dr. Robert P. Knight: Review of Freud's 'Interpretation of Dreams'.—Monthly Scientific Papers.

The Training Committee of the Topeka Society consists of: Dr. Karl Menninger (Chairman), Dr. Ernst Simmel, Dr. Bernard Kamm, Dr. Robert P. Knight.

Robert P. Knight.

### D. RECOGNIZED INDIVIDUAL ANALYSTS

Dr. Gerö, of Copenhagen, gave some lectures on psycho-analysis to students at the Psychiatric Clinic and to physicians with psychotherapeutic interests.

Dr. Adelheid Koch, of Sao Paolo, has embarked upon training work, with the assistance of a neurologist and psychiatrist who wishes to form an analytical circle in Sao Paolo. At present she is carrying out four training analyses (two physicians, one medical student, and one hospital nurse). In consequence of her special situation, Dr. Koch is also giving theoretical instruction to two of these candidates. She has delivered a number of lectures to psychological and psychiatric societies as well as to nurses.

Dr. Nikolaus Sugar, of Subotica, has two candidates in training. He

REPORTS

has also given a series of lectures. He further reports upon the Belgrade Psycho-Analytical Study Group, which was started in November, 1937, as a purely private group with eight members. Since then two meetings have been held with papers and discussions. Moreover, a closer co-operation has been established with the analysts working at Agram.

Dr. Heinrich Winnik, of Bucharest, is carrying out one training analysis (a woman teacher). He is also continuing a Seminar (with sixteen regular attendants) which is working through a number of Freud's writings.

#### CORRECTION

In the Presidential Report at the Business Meeting of the Fifteenth Congress (Journal, p. 122) there occurs a passage which, in the opinion of the Secretary of the American Psychoanalytic Association, might give rise to some misunderstanding, and, at his request, we append the following explanation.

In referring to the recent resolutions passed by the Council on professional education of the Association, mention was unfortunately omitted of the fact that these resolutions had previously been passed by the Training Committees of the Constituent Societies, each of which is responsible for the regulations valid for that Society.

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- S. NACHT.—Le Masochisme.
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- R. DE SAUSSURE.—Le Miracle grec (2º partie).
- ED. Pichon.—Note pour lever une apparente contradiction.

### SOMMAIRE DU NO. 3 DE L'ANNEE 1938

GARMA.—Psychanalyse d'Arthur Rimbaud.

EMILIO SERVADIO.—Le cerf-volant, le feu et la foudre.

- Ed. Pichon.—La personne et la personnalité vues à la lumière de la pensée idiomatique française.
- ED. PICHON.—Evolution divergente de la Génitalité et de la sexualité dans la civilization occidentale.
- R. DE SAUSSURE.-Le Miracle grec (fin).
- R. LAFORGUE.—Le facteur thérapeutique en psychanalyse.

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### CONTENTS

OBITUARY. Wm. McDougall. By May Smith.

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### CONTENTS FOR MAY, 1939

ORIGINAL ARTICLES: The Physiological Pathology of the Anterior Pituitary; by Max Reiss, M.D., D.Sc. Prague. - A Century of Psychiatry in the Punjab; by Lt.-Col. C. J. Lodge Patch, M.C., I.M.S.—On the Mechanism of the Cardiazol Convulsion; by D. J. Watterson, M.B., B.Ch., and R. Macdonald, M.B., Ch.B.—A Psycho-Pharmacological Study of Schizophrenia, with Particular Reference to the Mode of Action of Cardiazol, Sodium Amytal and Alcohol in Schizophrenic Stupor; by W. P. Berrington, M.B., B.Ch.Belf., D.P.M.Lond.—Affective Sequelæ of Convulsant Drug Therapy; by John B. Dynes, M.D.-Undesirable Mental Sequelæ to Convulsant Drug Therapy; by John B. Dynes, M.D.-Insulin Therapy: A Short Review of the Work Done in Grangegorman Mental Hospital; by John Dunne, M.B., B.Ch.R.U.I., D.M.D., and Eveleen O'Brien, M.B., B.Ch., B.A.O.N.U.I., D.P.M., D.P.H.-The Present Status and Functions of the Child-Guidance Movement in Great Britain, and its Possible Future Developments; by Douglas R. MacCalman, M.D.—The Analysis and Treatment of a Case of Neurotic Conduct Disorder in a Young Child Illustrating the Value and Use of Drawing in Child Guidance Technique; by H. Edelston, M.B., D.P.M.—The Meinicke Klarungs Reaction: The Development of an Improved Test; by W. M. Ford Robertson, M.D., Ch.B.Ed., and D. B. Colquhoun.—General Paralysis and its Treatment by Intravenous T.A.B.; by C. E. Roachsmith, M.R.C.S., L.R.C.P., D.P.M., and E. S. Stern, M.A., M.D. Cantab., M.R.C.P., D.P.M.-A Case of Jakob's Disease; by George Brown, M.D., D.P.M., and Donald Buckle, M.B., D.P.M.-Anodontia in Mongolism; by D. H. H. Thomas, B.Sc., M.R.C.S., L.R.C.P., D.P.M.-Also REVIEWS and BIBLIOGRAPHY AND EPITOME.

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## CONTENTS

ORIGINAL PAPERS	PAGE
C. P. OBERNDORF. ON RETAINING THE SENSE OF REALITY IN STATES OF DEPERSONALIZATION	137
SUSAN ISAACS. CRITERIA FOR INTERPRETATION	148
S. M. PAYNE. SOME OBSERVATIONS ON THE EGO DEVELOPMENT OF THE FETISHIST	161
SANDOR LORAND. RÔLE OF THE FEMALE PENIS PHANTASY IN MALE CHARACTER FORMATION	171
ABSTRACTS	
GENERAL	183
CLINICAL	184
SEXUALITY	189
APPLIED	192
BOOK REVIEWS	
CLINICAL ASPECTS OF PSYCHO-ANALYSIS. By René Laforgue	196
THE PSYCHOLOGY OF SOCIAL MOVEMENTS. By Pryns Hopkins	197
PERSONAL AGGRESSIVENESS AND WAR. By E. F. M. Durbin and John Bowlby	200
LA MUSICA NELLA PREISTORIA E NELLE ANTICHE CIVILTA. By Mario Degani	202
NEW HORIZONS FOR THE FAMILY. By Una Bernard Sait	203
PHILOSOPHY AND THE PHYSICISTS. By L. Susan Stebbing	204
BULLETIN OF THE INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION	
REPORT OF THE INTERNATIONAL TRAINING COMMISSION	212
CORRECTION	